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PRACTICAL OBSERVATIONS

ON

VENEREAL COMPLAINTS.

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ON

VENEREAL COMPLAINTS,

BY

F. SWEDIAUR, M.D.

THE THIRD EDITION CORRECTED AND ENLARGED;

TO WHICH ARE ADDED,

AN ACCOUNT OF A

NEW VENEREAL DISEASE,

WHICH HAS LATELY APPEARED IN CANADA;

AND A

PHARMACOPOEIA SYPHILITICA.

— Scientiae veros fines cogitent; nec eam aut animi cauſa petant, aut ad contentionem, aut ut alios deſpiciant, aut ad commodum, aut ad famam, aut ad potentiam, aut hujuſmodi inferiora; ſed ad meritum, et uſus vitae, eamque in charitate perficiant, et regnent.

Baco de Verul. Prof. ad nov. organ.

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PREFACE.

THE intention when I firſt publiſhed this ſmall Treatiſe, was to offer to the public in a conciſe, but, at the ſame time, perſpicuous manner, my own obſervations and diſcoveries, together with thoſe lately made by the firſt medical men in different parts of Europe, in that particular branch of medical ſcience ſo intereſting to mankind in general. I did not think proper at that time to enlarge the book with any thing that did not immediately relate to the improvement of real knowldege, either about the nature or cure of theſe dreadful complaints, with which I had myſelf the misfortune to be repeatedly affected. The reſult of thoſe obſervations was thus dear-bought experience to me; but for this very reaſon, perhaps, the more uſeful to my readers. The ſecond addition was printed off without any material alteration. In this third, I have added ſeveral new obſervations leading to the improvement of the hiſtory, nature, and cure of thoſe complaints. Whatever has been derived from other ſources, I thought it honourable and proper to acknowledge. I ſcorn the man who attributes to himſelf what he owes to others.—— The Pharmacopœia Syphilitica, I hope, will not be unacceptable to young practitioners.

F. SWEDIAUR.

PORT SETON, near *Edinburgh*,
Dec. 8. 1787.

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PRACTI-

PRACTICAL OBSERVATIONS ON VENEREAL COMPLAINTS.

Ad recte medendum omnino opus eſt, ut remedia, non ſolum generi, ſed ſpeciei cuique, et ſæpe etiam varietatibus quibuſdam, apprime ſint accommodata. CULLEN, SYNOP. NOS. METHOD.

CHAP. I.

Obſervations on the Venereal Infection, and the different Appearances of Syphilitic Complaints in general.

WE ſay, in the common language, a perſon is poxed, injured, or infected with the venereal diſeaſe, pox, or bad diſtemper*, when the venereal poiſon has been received into, or is diffuſed through, the ſyſtem, and there produces its peculiar effects. Theſe effects or ſymptoms are ulcers of the mouth, fauces; ſpots, tetters, and ulcers of the ſkin; pains, ſwelling, and caries of the bones, &c. But as long as the effect

* In Latin, this diſeaſe is called *lues venerea*, *morbus Gallicus*, or *ſyphilis*. Whether the name *ſyphilis* is derived from συς, *porcus*, and φιλια, *amor* (*amor porcinus*,) or whether it owes its origin to ſome other derivation, is uncertain. In French it is called *la maladie venerienne*, *la verole*, *la grande verole*: in German *die Luſtſeuche*, *die Franzoſen*.

fects of the poiſon are *local*, and confined to or near the genitals, the diſorder is not called Syphilis, Lues Venerea, or pox; but diſtinguiſhed by ſome peculiar name, according to its different ſeat or appearance; ſuch as Clap, Shanker, Bubo, &c.

Concerning the nature of the venereal poiſon, we know no more than we do about that of the ſmall-pox or any other contagion; we know only that it produces peculiar effects, which yield to a peculiar mode of treatment. It affects, like the ſcrophula, the lymphatic ſyſtem and the bones. Monkeys die ſometimes during cold weather in England of the ſcrophula, but they are never affected with the ſyphilis; and the reſt of animals ſeem, as far as we know, to be as little ſuſceptible of being affected by the venereal poiſon as the monkeys. *Baydford*, however, thinks they may be infected, but mentions no authority for his opinion. M. de *Pauw** likewiſe mentions, without naming his ſource, that dogs are liable to be affected with the venereal diſeaſe in Peru, but not in North America.

The ſmalleſt particle of this poiſon is ſufficient to bring on the moſt violent diſorder over the whole body. It ſeems to ſpread and diffuſe itſelf by a kind of fermentation and aſſimilation of matter; and, like other contagions, it requires ſome time, after being applied to the human body, before it produces that effect. It is not known whether it has different degrees of acrimony and volatility, or whether it is always

* See Recherches philoſophiques ſur les Americains.

ways the ſame in its nature, varying only with regard to the particular part to which it is applied, or according to the different habit and conſtitution, or particular idioſyncraſy, of the perſon who receives the infection. We know that mercury poſſeſſes a certain and ſpecific power of deſtroying the venereal virus: but we are quite uncertain whether it acts by its ſedative, aſtringent, or evacuant quality; or if not perhaps rather by a chemical elective attraction, whereby both ſubſtances uniting with one another, are changed into a third, which is no more hurtful, but has ſome new properties entirely diſtinct from thoſe which any of them had before they were united.

The variolus miaſma, we know, produces its effects in about twenty or twenty-four days after the infection is received from the atmoſphere, and eight or ten days if by inoculation; but the venereal virus ſeems to keep no particular period. At ſome times, and perhaps in particular perſons, it requires a longer time to produce its effects than at other times, or in other perſons. I have ſeen ſhankers ariſe in the ſpace of twelve hours, nay in a ſtill ſhorter time, indeed I might ſay in a few minutes, after an impure coition; whereas, in moſt caſes, they make their appearance only in as many days. The generality of men feel the firſt ſymptoms of a clap between the ſecond and fifth day after an impure coitus; but there are inſtances where they do not appear till after as many weeks or months. About ten years ago, I was conſulted by a young man who was ſeized with a violent diſcharge from the glans

(*Blennorrhagia balani*), along with a phymoſis, but without any ſhankers, four weeks after coition; and during all the interval, he felt not the leaſt ſymptom of the diſeaſe. Some years ago, a gentleman went out from London in ſeemingly perfect health to the Eaſt Indies; but on his arrival in that hot climate, after a voyage of four months, a violent clap broke out before he went on ſhore, though he could have received no infection during the voyage, as there was not a woman on board.

THERE are inſtances which render it probable that the virus may lie four, five, or ſix weeks, and perhaps longer, on the ſurface of the genitals before it is abſorbed; and were it not then to produce a ſhanker, might probably not be abſorbed at all. We ſee daily examples, where common women communicate the infection to different men in the ſpace of ſeveral weeks, while they themſelves have not the leaſt ſyphilitic ſymptom, local or univerſal; the poiſon lying all that time in the vagina harmleſs, and generally without being abſorbed.

How long the venereal virus may lurk in the body itſelf, after it has been abſorbed into the maſs of blood, before it produces any ſenſible effects, is a matter of equal uncertainty. There is ſcarce a practitioner who has not obſerved inſtances of its remaining harmleſs for weeks, or even months, in the body. I had acceſs to obſerve a caſe, where, after lying dormant for half a year, it broke out with unequivocal ſymptoms. But the following inſtance, if to be depended upon, is ſtill more extraordinary. Some years

years ago, I was conſulted by a gentleman about a ſore throat, which I declared to be venereal. My patient was aſtoniſhed; and aſſured me, that for nine years paſt he had not had the leaſt venereal complaint, nor had he any reaſon to believe he had ſince received any infection; but at that time he had been in the Eaſt Indies, where he was affected with a violent clap. On his return to Europe, being to appearance in perfect health, he married, and continued perfectly free of any ſuch complaint ever ſince. By a mercurial courſe, however, the complaint for which he applied to me was completely removed*.

With regard to its effects, the venereal poiſon follows no conſtant rule; for though in general it affects firſt the throat or ſkin before it produces any ſymptoms in the bones, we ſee in many inſtances the bones affected without any ſymptom in the throat or ſkin before or after. In ſome perſons it more particularly attacks the throat, where it produces ulcerations; while in others it exerts its virulence on the ſkin or bones. Whilſt the greateſt part of mankind are thus eaſily affected by this poiſon, there are ſome few who ſeem to be altogether unſuſceptible of the infection, and run every riſk without ſuffering in the ſmalleſt degree; juſt as ſome are never infected with the variolus contagion, though they go into infected places, and expoſe themſelves to inoculation or every hazard by

* This, and other ſimilar caſes, however, lead me rather to ſuſpect that an abſorption of the venereal poiſon may perhaps ſometimes take place without any previous external local affection of the genitals.

by which the diſeaſe is generally communicated. Some perſons are more liable to be infected than others ſeemingly of the ſame habit; nay, the very ſame perſon ſeems to be more liable to be infected at one time than at another; and thoſe who have been once infected ſeem to be more liable to catch the infection a ſecond time than thoſe who never were infected before with the diſeaſe. The climate, ſeaſon, age, ſtate of health, idioſyncraſy, are perhaps, as in other diſeaſes, the neceſſary prediſpoſing cauſes. The ſame difference is obſervable in the progreſs made by the diſeaſe after the patient is infected. In ſome the progreſs is ſlow, and the diſeaſe appears ſcarce to gain any ground; while in others it advances with the utmoſt rapidity, and ſpeedily produces the moſt terrible ſymptoms.

At what time this dreadful malady (the very idea of which poiſons the ſource of our moſt happy moments) was firſt known among mankind in general, or in Europe in particular, is a matter I cannot pretend to decide. Thus much we may affirm from the accounts tranſmitted to us by ancient writers, that the lues, with its horrid and fatal ſymptoms, ſuch as we find it firſt deſcribed by medical and other writers towards the end of the fifteenth century, had been unknown among our Greek or Roman anceſtors, though undoubtedly as licentious as their barbarous or refined poſterity. Local complaints of the genitals, indeed, very much like our preſent venereal complaints of thoſe parts in both ſexes, were known and accurately delineated by many of the ancient writers: Such are the different complaints deſcribed

deſcribed by AETIUS as well as thoſe related by PAULUS OF ÆGINA, and more eſpecially the *corroding ulcers of the prepuce and glans*; the *diſcharge of thin ſanious matter from the penis*; the *mortification and cancer of the penis*; the *phagedænic ulcer of the ſame*; the *warts of the prepuce and glans*; *condylomata ad anum*; the *ſwelled teſticles ariſing without external contuſion*; all mentioned and exactly deſcribed by CELSUS*. But none of theſe we find any where marked as contagious, as propagated by coition, or as producing ſymptoms like thoſe we now obſerve produced by the venereal virus when abſorbed and diffuſed through the ſyſtem; which, if they had ever happened, there is great reaſon to believe we would have been informed of by the medical, ſatirical, or hiſtorical writers of thoſe times; who were very careful and ſagacious obſervers, and otherwiſe far from giving us very favourable accounts of the chaſtity of the Roman ladies.

THOUGH, however, theſe local complaints, ſo much reſembling our preſent venereal ones, were not marked or obſerved to be contagious and propagated by coition at ſo early a period, they were a few centuries after, a long while before the lues broke out, experienced and obſerved to be ſo, by ſeveral ſucceſſive writers; and that thoſe diſeaſes were the very ſame with our preſent local venereal complaints, every unprejudiced reader may convince himſelf, by peruſing thoſe ancient writers; an hiſtory of which has been lately collected and publiſhed by one of the moſt

* Lib. vi. cap. xviii. De obſcœnarum partium vitiis.

moſt learned and ingenious phyſicians* in Europe, whatever *Friend*, *Aſtruc*, or other modern writers may ſay to the contrary.

Besides the law given in the manuſcript ſtatutes, *De diſciplina Lupanaris publici Avenionenſis* (Avignon), made in the year 1347 †, by Queen Joanna I. we find *Lanfrancus*, and more eſpecially *Salicetus*, in the XIII. century, mentioning *puſtules*, *ulcers*, *cancer of the glans penis*, ariſing *poſt coitum cum fœda muliere*. In the XIV. century, we find in *Gordon*, *Arnoldus de Villanova*, and particularly *Guido de Chauliac*, one of the firſt ſurgeons who wrote in the middle of that century, *excoriations*, *burnings*, *corroſive*, and *putrid ulcers*, mentioned as ariſing *propter decubitum cum muliere*

* Dr Hensler *Geſchichte der Luſtſeuche* (Hiſtory of the Lues Venerea), Vol. I. Altona, 1783; where he added, by way of a ſupplement, excerpts of the different authors in their original Latin language.

† After other regulations, the law proceeds thus: "Jubet "Regina Sabbato quolibet a Bayliva una cum chirurgo a conſu- "libus propoſito, mulieres meritorias ſingulas luſtrari; quotcun- "que in lupanari proſtant. Et ſi qua ſcortatione ægritudinem "ullam contraxerit, a cæteris ſeponi ut ſeorſim habitet, ne ſui "copiam facere poſſit; ut morbi præcaveantur qui a juvenibus "poſſent concipi."——*The Queen further orders, that every one of the women kept in that bawdy houſe ſhould be viſited every Saturday by the mother-abbeſs, together with a ſurgeon appointed by the magiſtrates for this purpoſe; and if there be any who have contracted ſome diſeaſe by* ſcortation, *the ſame ſhould be ſeparated from the reſt, and be ſhut up in a private room, ſo that ſhe may not lie with any man; in order to avoid by theſe means the diſorders which might be communicated by her to young men.*

muliere fœda: and Becket * ſays, "In an old MS. I "have by me, written about 1390, is a receipt for "*brenning of the pyntyl*, yat men clepe ye *Apegalle*. "*Galle* being an old Engliſh word for a *running ſore*. "They who know the etymology of the word *apron*, "cannot be ignorant of this. And in another MS. "written about fifty years after, is a receipt for "*burning* in that part *by a woman*." He likewiſe adduces two remarkable paſſages from Engliſh ſtatutes about bawdy-houſes: One of 1163 ſays, no ſtewholder to keep any woman that hath *the perilous infirmity of burning*. And that of 1430, written upon vellum, which was preſerved in the court of the biſhop of Wincheſter, begins thus: "Here begynne "the ordinances, rules, and cuſtoms, as well for the "*ſalvation of mannes life*, as for to aſchewe many "miſchiefs and inconvenients," &c. there is a law, with a penalty of a hundred ſhillings (a great ſum for the time), if any ſtewholder keeps women in his houſe *habentes nefandam infirmitatem;* or, as it is afterwards tranſlated, having any ſickneſs of *brenning*. I could adduce a number of ſimilar inſtances, but I think it unneceſſary to enlarge any further upon this ſubject here; I rather refer my curious readers to Dr. *Henſler*'s book, where they will find a complete evidence from hiſtorical facts.—But to fix the preciſe year or time when that dreadful epidemical diſorder, with horrid exulcerations and monſtrous excreſcences on the ſkin, with an intolerably ſtinking ichorous diſcharge from the ſame, ſwelling and caries of the

* See Philoſoph. Tranſactions, Vol. XXX. p. 839, &c. and Vol. XXXI.

bones, tormenting the patients with excruciating pains, called at the times the Gallic Diſeaſe (*morbus Gallicus*), and which ſoon after obtained the more proper name of Venereal Diſeaſe (*lues venerea, ſyphilis*), firſt appeared in Europe, is difficult and perhaps impoſſible exactly to determine: ſo much is certain, that this new diſeaſe broke out towards the end of the fifteenth century, between the years 1484 and 1494; and from the ſeveral writers of thoſe times, and the critical inquiries made by the late Dr. *Sanchez**, and more particularly by the laſt mentioned ingenious Dr. *Henſler*, it is highly probable that this diſeaſe had really exiſted in Europe ſeveral years before *Columbus* firſt returned from the Caribbee iſlands.

It is, at leaſt, undoubtedly wrong in us, to conclude that the diſeaſe was brought to Europe from the Weſt Indies, becauſe it appeared and became epidemic here at the time when Columbus returned from his firſt voyage 1493: or to ſay, that, becauſe it had been epidemic there, it was brought from thence to us. I think it might be equally reaſonable to allege, that it was brought into different parts of the globe by the ſame cauſe, at the ſame time. However, ſo far down as to the middle of the ſixteenth century, this diſeaſe was unknown altogether in South-weſt America; and in ſome parts of North America, it was not yet known of late. Curious and remarkable it is, that the firſt twenty years after the

* See Diſſertation ſur l'origine de la maladie venerienne, and Examen hiſtorique ſur l'apparition de la maladie venerienne en Europe.

the appearance of this new and peculiar diſeaſe, it was aſcribed to a peſtilential temperature of the air; and nobody, neither phyſician, nor any other perſon, had the leaſt idea or ſuſpicion of its being ever communicated by coition, or in the leaſt connected with any diſcharge from the urethra or ulcers of the genitals.

Indeed no mention is made by any of the earlier writers on the venereal diſeaſe, of the genitals being any way ever affected; and the diſeaſe was at that period looked upon as a kind of plague (*Peſtis, Morbus Peſtilentialis*). Only, in the beginning of the ſixteenth century, *Pinctor*, *Torella*, and *Almenar*, firſt mention, that the venereal diſeaſe begins in the genitals, and from thence is ſpread and diſſeminated; which, however, was at the time denied by others to be always the caſe.

Was this new cutaneous diſeaſe really a different diſeaſe at the time? and was it only afterwards, by being united or blended with the virus that produced blennorrhagias and ulcers of the genitals long before, that it transformed itſelf, if I might ſay ſo, into our preſent ſyphilis? Were the local diſeaſes of the genitals of former ages, and the cutaneous epidemic plague of the fifteenth century, two different diſeaſes?

Whether the venereal poiſon can be abſorbed into the ſyſtem, without a previous excoriation or ulceration of the genitals, or ſome other parts of the ſurface of the body, was, as I mentioned in the for-

mer editions of this book, ſtill a matter of doubt. Several caſes however, which occurred to me and to others, render it highly probable, if not certain, that the poiſon really is now and then abſorbed, without any previous excoriation or ulceration whatſoever, and thus produces buboes and other venereal ſymptoms in the body.

It has been aſſerted by the earlieſt and even by ſome late writers, that it may be caught by lying in the ſame bed or living in the ſame room with or after an infected perſon *. What may have been the caſe at the commencement of this diſeaſe, I cannot ſay; but, from the moſt accurate obſervations and experiments I have made upon the ſubject, I have never been able to confirm this to be the caſe in our times.

* The diſeaſe, in its origin, muſt have been very contagious indeed, or, at leaſt, been ſuſpected to be ſo; becauſe, in the year 1529, in November, when Cardinal Wolſey, King Henry VIIIth's prime miniſter, was accuſed, amongſt other articles of charge brought againſt him by the Houſe of Lords, the very remarkable one is, his whiſpering in the King's ear, knowing himſelf to be affected with venereal diſtempers. See *Hume's Hiſt.* Vol. IV. *p.* 451, *note C.*

Schellig, a German phyſician, the earlieſt writer on this diſeaſe, who wrote in the year 1494 or 1495, ſays, that the poiſon is very ſubtle, and eaſily proves contagious, not only by the air, breath, or habitation in the ſame room, but alſo by the clothes which had been worn by infected people.

The Sibbens in Scotland is now-a-days caught, not only by lying in bed with, but alſo on the ſlighteſt touching of the perſon affected. But this diſorder ſeems to be a diſeaſe compoſed of the itch and the lues; and may therefore be eaſily communicated by the touch.

times. Nor do we ever ſee nurſes infected in the Lock Hoſpital, where they live night and day with patients in all ſtages of the diſtemper. The fact ſeems to be, that patients in our times are apt to impoſe upon themſelves, or upon phyſicians and ſurgeons, with regard to this matter; and the above opinion eaſily gains ground among the vulgar, eſpecially in countries where people are more influenced by prejudices, ſuperſtition, ſervile ſituation in life, or other circumſtances. Hence we ſometimes hear the moſt ridiculous accounts given in thoſe countries, by friars and common ſoldiers, of the manner by which they came to this diſorder: Such as piles, gravel, colics, contuſions, fevers, little-houſes, lying in ſuſpected beds, or lying in a bed with a ſuſpected perſon, retention of the ſemen, coitus with a woman in menſtruation, the uſe of cyder, bad wine or beer, &c.

Another queſtion, which I am equally unable to decide, is, Whether the veneral poiſon ever infects any fluid of our body beſides the mucous and lymphatic ſyſtem. Hence I am in doubt, whether the venereal poiſon in an infected woman ever affects the milk; and conſequently whether the infection can thus be conveyed to the infant by the milk alone, without any venereal ulcers on or about the nipples. It is equally a matter of uncertainty to me, whether the venereal diſeaſe is ever conveyed from an infected father or mother, by coition, to the fœtus, provided their genitals are ſound: or, whether a child is ever affected with venereal ſymptoms in the uterus of an infected mother. Such infected infants as

came

came under my own obſervation, or that of my friends, whoſe practice affords them frequent opportunities of ſeeing new-born infants, ſeemed rather to militate againſt the opinion. Neither I myſelf, nor any of them, have ever been able to obſerve ulcers or other ſymptoms of a venereal kind upon new-born children; and ſuch as make their appearance four, ſix, eight, or more days afterwards, on the genitals, anus, lips, mouth, &c. may rather be ſuppoſed to ariſe by infection during the paſſage from ulcers in the vagina of the mother; the ſkin of the infant being then nearly in as tender a ſtate as the glans penis or the labia; and this is perhaps the time when an abſorption of the venereal poiſon might eaſier take place without a previous excoriation or ulceration of the ſkin.

ALL the ways, therefore, by which we ſee, in our days, the venereal poiſon communicated from an unhealthy to an healthy perſon, may be reduced to the following heads:

1. *By the coition of an healthy perſon with another who is infected with venereal ſymptoms of the genitals.*

2. *By the coition of an healthy perſon with another apparently healthy, in whoſe genitals the poiſon lies concealed, without having yet produced any bad ſymptoms.* Thus, a woman who has perhaps received the infection from a man two or three days before, may, during that time, infect, and often does infect, the man or men who have to do with her afterwards, without having any ſymptom of the diſeaſe viſible upon

upon herſelf; and, *vice verſa*, a man may infect a woman in the ſame manner. Such inſtances occur in practice every day.

3. *By ſucking.* In this caſe, the nipples of the wet nurſe may be infected by venereal ulcers in the mouth of the child; or, *vice verſa*, the nipples of the nurſe being infected, will occaſion venereal ulcers in the child's noſe, mouth, or lips. I have mentioned above, that I was uncertain, whether the venereal poiſon was ever propagated by means of the milk from the breaſt.

4. *By expoſing to the contact of the venereal poiſon any part of the ſurface of the body*, by kiſſing, touching, &c. eſpecially if the parts ſo expoſed have been previouſly excoriated, wounded, or ulcerated, by any cauſe whatever. In this manner we frequently ſee venereal ulcers ariſe in the ſcrotum and thighs; and there are ſome well-atteſted inſtances where the infection took place in the fingers of midwives or ſurgeons. I have likewiſe ſeen ſeveral inſtances of venereal ulcers in the noſtrils, eye-lids, and lips, of perſons who had touched their own genitals, or thoſe of others, affected at the time with local venereal complaints, and then rubbed their noſtrils, &c. with the fingers, without previouſly waſhing the hands.

We had a few years ago here in London, a melancholy example of a young lady, who, after having drawn a decayed tooth, and replaced it with one taken immediately from a young woman apparently in perfect health, was ſoon after affected with an ulcer in

in the mouth. The ſore manifeſted ſymptoms of a venereal nature: but ſuch was its obſtinacy, that it reſiſted the moſt powerful mercurial remedies, terminating at laſt in a caries of the maxilla, with a moſt ſhocking eroſion of the mouth and face; by which the unhappy patient was deſtroyed: during all this, however, we are informed, that not the ſmalleſt venereal ſymptom was perceived in the woman from whom the ſound tooth was procured.

5. *By wounding any part of the body with a lancet or knife infected with the venereal virus.* In this inſtance there is a ſimilarity between the venereal poiſon and that of the ſmall-pox. We have ſeveral examples of the latter being produced by bleeding with a lancet which had been previouſly employed for the purpoſe of inoculation, or of opening variolus puſtules, without being properly cleaned afterwards. In Moravia, in the year 1577, a number of perſons who, being aſſembled in a houſe for bathing, had themſelves, according to the cuſtom of that time, ſcarified by the barber, were all of them infected with the venereal diſeaſe, and treated accordingly. *Krato* the phyſician, and *Jordan* who gave a deſcription of this diſtemper, are both of opinion that it was communicated by means of the ſcarifying inſtrument. And Van Swieten relates ſeveral inſtances where the lues was communicated by a ſimilar careleſſneſs in cleaning the inſtrument uſed in bleeding or ſcarification.

No branch of the medical art has, as far as my knowledge extends, received ſo many valuable improvements

provements from modern practice as the treatment of the different venereal complaints. Theſe improvements, I venture to ſay, were principally made, becauſe medical men themſelves were as much ſubject to theſe complaints as any other perſon; and I believe, that amongſt the variou diſeaſes to which mankind are ſubject, there is none of which the cure is now more eaſy and certain than the venereal diſeaſe, if properly and judiciouſly treated: but if, on the other ſide, neglected, or unſkillfully treated, we ſee it often not only extremely obſtinate, but ſometimes incurable and fatal; and it is a well-known truth, that many perſons have their conſtitution broken, and ſuffer more by the prepoſterous treatment than by the diſeaſe itſelf. Yet there is ſcarce any diſeaſe in which more people pretend to ſkill than in this; and among the whole herd of quacks, there is hardly one who does not pretend to ſome ſuperior knowledge, or to the poſſeſſion of ſome particular noſtrum, which he ſets forth as the beſt and moſt infallible remedy for this diſorder in all its various ſtages. Thus, with conſummate impudence they impoſe on ſuch patients as have the misfortune to fall into their hands, and who, ſooner or later, generally ſuffer ſeverely for their credulity; whereas it is beyond doubt, that the cure of this diſtemper in all its various ſtages, requires not only a great degree of judgment in the choice and doſe of the medicines, but likewiſe ſuch an exact knowledge of the conſtitution of the patient, as is not to be obtained but by attentive experience and judicious obſervation. Hence more than common abilities are often requiſite perfectly and radically to cure a confirmed

lues, or venereal complaints which have been prepoſterouſly treated. The great number of unfortunate victims to ignorance and rapacity, which we daily ſee, are but ſo many confirmations of the truth of this aſſertion.

From the moſt authentic accounts, it cannot be doubted that venereal complaints were formerly much more dreadful, violent, and even not unfrequently fatal. This is generally imputed to the more malignant nature of the poiſon at that time; and it is imagined that it afterwards grew more mild. This may indeed be true in ſome reſpects; though, on the other ſide, I have ſeen the diſeaſe, with all its different ſymptoms, in a number of inſtances, as violent and inveterate as ever deſcribed by any author of the ſixteenth or ſeventeenth century. We ſee, however, in general, thoſe dreadful complaints now by far not ſo often in Europe. This may indeed be partly owing to the venereal poiſon having grown milder by its diffuſion through mankind; but greatly, I think, to the improvements made in the treatment of this diſeaſe, and more eſpecially to the enlightened principles of humanity ſpreading all over Europe, and happily ſucceeding the barbarous ſuperſtition and cruelty of former times. We no longer abhor or expoſe thoſe poor unhappy wretches on the dunghill, or let them die, as the Kalmucks do their brethren and children affected with the ſmall-pox, without giving them the leaſt aſſiſtance: both ſexes, being in our times leſs expoſed to the prejudice of others, apply ſooner for relief, and obtain it more eaſily from more humane and better inſtructed phyſicians and ſurgeons; and

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I am perſuaded it is owing principally to this, that the diſeaſe is not only leſs frequent, but in all its different ſymptoms leſs violent, in London, than in any other capital in Europe. People of the lower claſs have not only ſo many places where they obtain advice and medicines from unprejudiced and ſkilful perſons for nothing; but thoſe of the female ſex, who would perhaps be detained by ſhame from applying to ſuch a place, eaſily find ſome benevolent perſon who will give them money to ſupport themſelves during their miſerable ſituation; and as eaſily a medical man, who will undertake to cure them without expecting any remuneration whatſoever. I know this is no where the caſe on the continent of Europe: beſides; the generality of their phyſicians and ſurgeons, not having the advantage of ſuch a liberal education, have not ſeldom more confined notions of morality, and often but a very ſuperficial knowledge of this diſeaſe. Our phyſicians and ſurgeons, do not think themſelves authoriſed to reproach their venereal patients with their miſery in a rude and inhuman manner; nor are they ſo infatuated with ſuperſtition, as to believe, and look upon themſelves as the choſen inſtruments of heaven, to puniſh thoſe poor creatures for thoſe imaginary crimes, rather than to relieve them, as I have a thouſand times heard even in ſeveral great capitals on different parts of the continent. Our magiſtrates and police do not force theſe wretches into a priſon, or into an hoſpital not very different from a priſon; but they are ſatisfied to put in their way all poſſible means to procure relief for themſelves. In other countries, where government purſues a different plan, where

poor venereal patients have no place of reſort, where they are expoſed to die of hunger during the cure, or where they are even intimidated from applying in time; in thoſe countries I have frequently ſeen the diſorder in its moſt horrid ſtages, and ſuch as are almoſt unknown in this country. In ſhort, let a perſon make the tour of Europe, and only take notice of the venereal patients, as well as thoſe who are confined in hoſpitals, as thoſe who live or die unnoticed, under the moſt horrid ſymptoms of this diſeaſe, *in their private abodes;* and he will, in my opinion, be able to form as ſolid a judgment of the comparative progreſs of enlightened principles of governments in different countries, from theſe obſervations, as from any other inquiry whatſoever. He will be aſtoniſhed to find at this day ſuch a difference between the ſeveral governments with regard to barbarity and humanity, as I found with reſpect to ſcience and learning, not many years ago, between two modern univerſities; I mean *Goettingen* in Hanover, and *Louvain* in the Netherlands. In the former, every inſtitution ſeems calculated to inculcate upon the minds of young men every kind of uſeful knowledge, and the moſt liberal principles of philanthropy; whereas, in the latter, every thing ſeems to conſpire to keep the youth in ſuperſtition and ignorance, and to engrave in their hearts all the principles of intolerance and hatred of *true* learning of every kind, for which we now ſo juſtly blame our forefathers.

I HAVE at leaſt hitherto found, in my different travels, the frequency and violence of venereal complaints

plaints in different countries, to be exactly in proportion to the degree in which knowledge and liberal principles are diffeminated among the different nations. From theſe obſervations, I am led to believe, that if a judicious plan, with proper regulations and precautions, was adopted by any government, in whatever climate, all the violent ſymptoms of the venereal diſeaſe would not only be rendered uncommon, but the diſeaſe itſelf might be, if not entirely eradicated, at leaſt greatly diminiſhed in its frequency: But ſuch a plan, though eaſily conceived and executed, ſeems not yet adapted to the taſte of the preſent age, but rather calculated for our humane, leſs prejudiced, and more enlightened poſterity.

CHAP.

CHAP. II.

On the Blennorrhagia or Clap.

The *Clap* * is a local inflammation, attended with the diſcharge of a *puriform* matter from the lacunæ or mucous glands of the urethra in men, and from thoſe of the labia or vagina in women; accompanied with a frequent deſire of making water, occaſioning a ſcalding, or pricking and burning pain, during the time

* This diſeaſe occurs in the Latin authors under the different denominations of *Gonorrhœa*, *G. Virulenta*, *G. Venerea*, *Fluor Albus Malignus*. The name *Gonorrhœa* is derived from the Greek γονη, *genitura*, *ſemen*, and ῥεω, *fluo*, i. e. *fluxus ſeminis*; which is a very improper name for the diſorder in queſtion, becauſe it conveys an erroneous idea. The name *Gonorrrhœa* implies a diſcharge of ſemen, which never takes place in this diſorder. If a Greek name is to be retained, I would call it *Blennorrhagia*, from βλεννος, *mucus*, and ῥεω, *fluo*, *i. e. Muciſluxus* (*activus*;) and thus diſtinguiſh it both from real *gonorrhœas* and from *gleets*; to which latter I would give the name *Blennorrhœa*, *Muciſluxus* (*paſſivus*,) *i. e.* without phlogiſtic ſymptoms. In Engliſh, the diſeaſe is commonly called a *Clap*, from the old French word *clapiers*; which were public ſhops kept and inhabited by ſingle proſtitutes, and generally confined to a particular quarter of the town, as we ſee ſtill to-day in ſeveral of the great towns in Italy; in German, a *Tripper*, from dripping; and in French, a *Chaude-piſſe*, from the heat and ſcalding in making water: names derived from the principal ſymptoms of the diſeaſe. See the *Noſological Table* of this diſeaſe at the end of the following chapter.

time of its paſſage; which may ariſe from any acrid ſtimulus, but more eſpecially and generally from the venereal poiſon applied to thoſe parts.

This diſtemper, we may obſerve, 1. Is a local inflammation; and therefore, like all thoſe of the ſame kind, does but ſeldom affect the whole ſyſtem.

2. The diſcharge, though the matter has a purulent appearance, is not a real *pus*, much leſs *ſemen*, as ſome patients fancy. The matter diſcharged is nothing elſe but merely the mucus of the urethra or vagina ſecreted in a larger quantity than uſual, and changed in its colour and conſiſtence by the ſtimulus applied to theſe parts; like the mucous diſcharge from the noſe or lungs in a coryza, or cough from cold, where the mucus aſſumes nearly the ſame purulent appearance: for which reaſon I gave it the new, but I hope proper, name *puriform*.—It is an erroneous notion, that this diſcharge ariſes always from an ulcer in the urethra. In ninety-nine out of an hundred claps, perhaps there is no ſuch thing as an ulcer; but the diſeaſe is merely a ſuperficial eryſipelatous inflammation of the internal membrane of the urethra, like that above-mentioned of the mucous membrane of the noſe or lungs from cold*. For in this

* This has been hitherto rather ſuppoſed, than proved by any direct fact. Anatomiſts, examining the urethra of men who had laboured during their lifetime repeatedly under claps, found, after death, no cicatrix in the urethra; and thence the concluſion was drawn, that thoſe diſcharges were generally not accompanied with an ulceration. This, however, would prove little or nothing; becauſe we ſee daily, that ſhankers on the prepuce or glans, though ſometimes

this laſt caſe, though the diſcharge has much the appearance of purulent matter, we know that it does not proceed from an ulcer in the noſe or lungs. Thus we may eaſily account for the quantity of the matter diſcharged; and have no reaſon to be ſurpriſed that ſo large an excretion as is frequently obſerved in violent claps, ſhould ſo little affect the conſtitution: while if an equal quantity of ſemen, or real pus, was diſcharged, we ſhould find the conſtitution and ſtrength of our patients materially injured; which, however, is hardly ever the caſe, even in the moſt virulent clap.

3. I HAVE ſaid, that the diſcharge, though moſt generally ariſing from the venereal virus, may proceed from any ſtimulus ſufficiently ſtrong applied to the urethra. To diſcuſs this latter ſubject more fully, I ſhall conſider it under the three following heads.

I. I AM of opinion, that claps, "ariſing from an "*external*

ſometimes pretty deep, go off, and are a ſhort time after ſo obliterated, as not to leave the leaſt mark of a former ulcer or cicatriſation behind. To conclude thence that there has never been any ulcer, becauſe in ſuch a cadaver we find no cicatriſation on the prepuce or glans, would in this caſe be evidently wrong. But what anatomiſts have hitherto only ſuppoſed, is now made evident by an obſervation of my friend Dr. *Stoll*, profeſſor of the practice of phyſic at Vienna. He diſſected a man who died in his hoſpital while labouring under a virulent clap. On opening the urethra carefully, he found its internal ſurface preternaturally red; two of the lymphatics white and enlarged; and the puriform matter oozing out from the internal membrane, eſpecially at the lacuna, where the ſeat of the diſorder was, without the leaſt appearance of an ulceration or excoriation.

" *external* cauſe, are actually excited by the ſtimulus " applied to the cavity of the urethra itſelf;" and that conſequently, in coition, the virulent mucus of the vagina is driven, or, if I might ſo ſay, pumped or forced into the urethra, and not, as ſome writers have imagined, abſorbed by the lymphatics of the glans penis, and thence depoſited at the lacuna under the frænum.—If ſuch an abſorption actually took place, we ſhould every day obſerve virulent runnings originally ſeated low down in the urethra, as well as under the frænum; whereas this is ſeldom or never the caſe. The ſeat of theſe runnings is always originally in the lacuna Morgagni, under the frænum; and thoſe which are found to have their ſeat at the curvatura penis, or lower down in the urethra, are not ſo at the commencement of the diſeaſe, or ariſe from an internal cauſe. What has been ſaid of the impoſſibility of ſuch an immediate application of the virus to the inſide of the urethra, becauſe its orifice is cloſely ſhut up during erection, and therefore admits not of any ſuch introduction, appears to me only to be reaſoning from an ill-grounded theory*.

II. I SHALL prove, both from well-eſtabliſhed principles, and from practical obſervations, " that claps " not only may, but moſt frequently do, ariſe from " the ſame venereal poiſon which, applied to other

 " parts

* What is ſaid here relates only to thoſe claps which ariſe from a cauſe externally applied. But though venereal blennorrhagias do generally ariſe from an external cauſe, it is highly probable to me, that they may ſometimes be excited by the venereal or any other acrid matter depoſited from the maſs.

" parts of the body, produces ſhankers, or other " ſymptoms of the lues."—It has of late been aſſerted, even by ſome phyſicians of eminence, that the poiſon which produces a clap is different from that which produces the lues; and ſeveral ſpecious arguments have been brought in favour of this paradoxical opinion. This diſpute concerning the nature of claps, leads me into a diſcuſſion the more agreeable, as it is of conſiderable importance in practice; and as experiments and obſervations will, I think, enable me to prove not only the contrary, but perfectly to reconcile the different opinions, and thus ſet the matter in a clear light, and free it from that obſcurity in which it has been hitherto involved. I enter therefore into the diſcuſſion of this ſubject with the conſideration of the different reaſons alleged for that favourite doctrine.

Firſt, It is ſaid, That *the poiſon which produces the clap does never, like that of ſhankers, produce any venereal ſymptoms in the maſs, or the lues itſelf.* To this I reply, that though a lues is ſeldom produced by a blennorrhagia, yet we are by no means to look upon this as univerſally true. The reaſon why claps do not, like ſhankers, conſtantly produce the lues, is, that moſt of them, if not ill treated, excite only a ſuperficial inflammation in the internal membrane of the urethra, without any ulceration. Hence abſorption cannot eaſily take place, the poiſon being out of the courſe of the circulation. But I have ſeen claps, through injudicious treatment, or where the diſeaſe had been originally accompanied with an ulcer of the urethra, followed by the moſt unequivocal

vocal ſymptoms of the lues itſelf. The reaſon why the venereal poiſon indeed, when applied to the urethra, does not ſo frequently produce ulcers as when applied to the glans, prepuce, and other external parts, is, that the internal membrane of the urethra is defended by a large quantity of mucus, the ſecretion of which is moreover augmented, ſometimes to a ſurpriſing degree, by the preſent ſtimulus. As long as this mucus is ſecreted in ſuch abundance, the poiſon is inveloped, the urethra defended, and thus the formation of ulcers effectually prevented: but if, either from the violence of the irritation, or from any other cauſe, this ſecretion is diminiſhed, or if by improper injections the mucus be waſhed away while ſome of the poiſon remains; I am of opinion, from more than twenty inſtances which occurred to me, that in nine ſuch caſes out of ten, an excoriation or ulceration of the urethra, and ſubſequent pox, will be as certainly the conſequence, as from venereal ulcers in any other part of the body. If there was the ſame quantity of mucus between the perpuce and the glans, as there is in the cavity of the urethra, we ſhould as ſeldom ſee ulcers there as we do in the urethra in caſes of ſimple blennorrhagia. We obſerve, that when the poiſon meets there with a large quantity of mucus, as is ſometimes the caſe, it then produces no ulcers, but only a great ſecretion of puriform mucus, which is commonly called a *gonorrhœa ſpuria*, but which with more propriety may be termed a *Blennorrhagia balani*, i. e. an active diſcharge from the glans or corona glandis. The reaſon why this kind of running is leſs frequent than thoſe from the urethra, appears to me to be, the

ſmall quantity of mucus which in moſt people is ſecreted in theſe parts; whence the virus, not being ſufficiently diluted, commonly produces theſe eroſions, or venereal ulcers, called ſhankers.—This likewiſe receives a conſiderable confirmation from the well-known fact, that women very ſeldom have ſhankers in the vagina though very frequently in the labia pudendi and nymphæ. The mere want of a ſufficient quantity of mucus on the latter, accounts, in my opinion, ſufficiently for this effect.

Secondly, They maintain, That *the poiſon of the clap never produces ſhankers, and that the poiſon of ſhankers never produces a clap.*—In confirmation of this aſſertion, it has been ſaid, that a perſon who has ſhankers will never communicate any other complaint but ſhankers, and that a perſon who has a clap cannot communicate any thing but a clap. I will not deny that this is frequently the caſe; but repeated and attentive obſervation authoriſes me to ſay, that, like too many other medical writers, they have drawn a general concluſion from a few obſervations favourable to their own preconceived opinion. For in many caſes where I had occaſion to examine both parties, I have been convinced, that ſhankers were communicated by a perſon affected with a ſimple clap; and, *vice verſa*, that a virulent clap had been the conſequence of an infection from a perſon having ſimple ſhankers only. But there is a more ſtriking proof than this, which has not been taken notice of, viz. if a patient afflicted with a venereal running does not take care to keep the prepuce and glans perfectly clean, ſhankers will very often be produced;

ced; the cauſe of which may evidently be traced to the matter of the clap. This is one of the principal reaſons why, in caſes of blennorrhagia, we inſiſt ſo much on the parts being kept clean; experience having taught us, that ſhankers frequently ariſe from negligence in this particular, even ſometimes after the running has conſiderably abated. For the ſame reaſon, I conſtantly order thoſe patients to keep their hands clean; having ſeen repeated inſtances of venereal ulcers in the noſe and eye-lids being the conſequence of this neglect. But beſides this, will any man of the medical profeſſion doubt, that matter taken from a ſhanker, and applied to the urethea, would not produce a clap? This is an experiment which I certainly ſhould not venture to try on myſelf. I muſt conclude, therefore, that though writers who have aſſigned this ſecond reaſon, may be right in a few caſes which fell under their own obſervation, they are wrong in deducing a general rule from a few facts; as I myſelf would be, in concluding from ſeveral contrary inſtances which I have obſerved, that a clap always communicates ſhankers, and ſhankers always a clap. Some caſes of this kind I have ſeen, as already mentioned, where in the fourth or fifth week of an ill-treated clap, or from a neglect of external cleanlineſs, ſhankers have been produced in places that had been perfectly well before: but this ſurely would be a very ſlender reaſon for aſſerting that ſuch is always the caſe. Theſe ſhankers ariſing from the matter of a clap, were, to my obſervation, conſtantly as virulent and infectious as original ones; and, like theſe, when left to themſelves, produced the ſame pernicious ſymptoms in the

the body; and if a perſon who has ſuch ulcers was to believe that they are not venereal, nor capable of bringing on the lues, becauſe they ſo plainly originated from the matter of a clap, he certainly would find himſelf moſt diſagreeably miſtaken.

Thirdly, The laſt, and in their opinion the moſt unanſwerable, reaſon for believing that the virus of a clap and of a confirmed lues are materially different is, as they ſay, That *mercury never contributes to, or accelerates, the cure of a clap; but that, on the contrary, every blennorrhagia may be certainly cured without mercury, and without any danger of leaving the lues behind.*—To this I reply, That it is indeed a certain and authenticated fact, that a great many claps may be, and are, cured without mercury. I have ſeen many inſtances, where water, drunk for a conſiderable time, has cured the clap fully as well as any medicine whatever. Nature is very often able to effect a cure in acute diſtempers, if we would allow her to proceed undiſturbed in her operations. Nature, when irritated by the poiſon, will excite a greater ſecretion of mucus than uſual, in the ſame manner as the lachrymal gland pours out a larger quantity of water when a grain of ſand falls into the eye. This larger quantity of mucus anſwers the purpoſe of diluting the poiſon as effectually as any medicine artificially injected. Beſides, the poiſon is by this means not only diluted, but carried off in part by the running; and the modern practice of curing claps, by injecting ſweet oil, or other mucilaginous liquors, into the urethea, does nothing but aſſiſt nature in this ſalutary work.

But

But though I allow that claps may generally be cured without mercury, yet repeated experience has ſhown me, that it is not always poſſible to accompliſh a cure in ſuch an agreeable manner. In thoſe caſes where the blennorrhagia is of a milder kind, without any ulcer or excoriation in the urethra, it may certainly be radically cured without uſing a grain of mercury: and though mercury ſhould be given in ſuch caſes internally, it cannot have the leaſt effect; not becauſe the diſeaſe does not proceed from a venereal poiſon, but becauſe it lies out of the reach of the cirulation.

To what is further alleged, that mercury never ſhows any power in accelerating the cure of a blennorrhagia, I reply, That they not only confound the runnings which ariſe from the venereal virus, with thoſe which are occaſioned by other cauſes; but that they do not make a proper diſtinction between the internal uſe of mercury and the topical application of it. I readily allow, that mercury given internally cannot cure ſimple claps, as the cauſe of the diſeaſe lies out of its reach. But the ſame conſequence cannot be drawn concerning its topical application. I am indeed perfectly convinced, not only that mucilaginous injections, combined with mild mercurial preparations, contribute to the cure, but that they are the ſafeſt, ſpeedieſt, and beſt of all methods for that purpoſe: though I do not deny, that in ſimple claps mercury applied in this way does not always produce beneficial effects; which, however, is often owing, I think, to the uſe of improper medicines or injections.

It muſt alſo be obſerved, that in this diſpute, the contending parties ſeem to have entirely overlooked the diſtinction between the ſimple venereal blennorrhagia and that combined with an ulceration of the urethra: and of ſuch importance is it to attend to this diſtinction, that daily experience ſhows us, that runnings of the latter kind are not only cured more ſafely and expeditiouſly by the uſe of mercury, but that they are very often, if not always, totally incurable without it; and that the gleets remaining after theſe claps, though they obſtinately reſiſt all other remedies, yet frequently very readily yield to the uſe of mercury, either externally or internally applied. I can even affirm with certainty, that a gleet of this latter kind, of any ſtanding, can never be radically cured without it.

I now proceed to examine the laſt part of this objection, viz. That a clap never leaves a lues behind. This they have, no doubt, very frequently obſerved; but here they fall into the ſame miſtake as formerly, by not diſtinguiſhing ſimple claps from thoſe accompanied with an ulceration of the urethra. Indeed it muſt be allowed, that an abſorption cannot eaſily take place in ſimple blennorrhagias: though I confeſs it to be yet a matter of doubt with me, whether even in this caſe an abſorption and conſequent lues do not *ſometimes* happen; at leaſt we have not a ſufficient number of obſervations to determine this point with certainty.

But whatever may be the caſe in ſimple blennorrhagias, it is certain, that when the diſeaſe is accompanied

panied with an ulcer of the urethra, the parts are then diſpoſed to an abſorption of the virus. In theſe circumſtances, I never met with a ſingle caſe where this abſorption did not take place; and, if early recourſe was not had to mercury, the lues moſt certainly was the conſequence. I have alſo met with ſeveral inſtances, where, from the accidental wounding of a ſmall blood-veſſel in the urethra by the unſkilful application of the ſyringe or catheter, the virus of a ſimple clap has been abſorbed, and produced unequivocal venereal ſymptoms in the ſyſtem; which, notwithſtanding their origin, yielded very readily to mercury. We may therefore aſſuredly conclude, that there are ſome claps which cannot be cured without mercury; though there are others which may be removed without the uſe of that remedy, and without any bad conſequence enſuing. An account of ſome inſtances which came under my obſervation, will ſet this matter in a clearer light.

A YOUNG man of about twenty-three years of age, in perfect health, happened to be infected with a ſimple blennorrhagia, without any other venereal ſymptom. The running had been injudiciouſly ſtopped; the conſequence of which was a total ſuppreſſion of urine. A ſurgeon was called; and the patient being unable to bear any longer the pain from the diſtention of the bladder, recourſe was had to the catheter. But on approaching the neck of the bladder, a great reſiſtance was found, which prevented the inſtrument from being further introduced, though every poſſible method was tried. After waiting a little while, a ſecond attempt was made, but with-

out ſucceſs. As the pain increaſed, and from the accumulation of urine there was great danger of a rupture of the bladder, a paſſage for the catheter was at laſt forced with as little violence as poſſible; which was ſucceeded by ſome drops of blood from the urethra, and followed by a large diſcharge of urine. By proper treatment the patient recovered in a few days from this dreadful ſymptom; the running came on again; and, in a ſhort time after, he was, as we imagined, thoroughly cured. But ſoon after, although there had not been the leaſt appearance of a ſhanker throughout the whole courſe of the diſeaſe, an exoſtoſis, with a violent pain about the middle of the ſternum, made its appearance. Mercury was adminiſtered; in a few days the patient found himſelf better, and in five weeks was perfectly cured.—Now from an attentive conſideration of this caſe, I would aſk any unprejudiced perſon, Whether it is not reaſonable to ſuppoſe, that by forcing the catheter ſome veſſel had been wounded, in conſequence of which the abſorption took place; that the patient was from that moment infected, and afterwards cured in the ſame manner as if he had received the infection from a ſhanker *.

A

* The different period of time at which the venereal diſeaſe and the blennorrhagia firſt appeared, has alſo been urged as an argument for the difference between the virus of the one and that of the other. But it is abſurd to oppoſe uncertainty to uncertainty: we are, I think, as ignorant of the preciſe period when the lues firſt appeared, as we are of that of the clap. It has been aſſerted, that the inhabitants of the South-ſea Iſlands, though afflicted with the lues, are yet free from the blennorrhagia.

A GENTLEMAN of about forty years of age, who formerly had laboured under different claps within theſe laſt five or ſix years, got one, which he found, as he ſaid, rather mild, without much pain in making water, and hardly any pain in erection the firſt five or ſix days; when, after violent exerciſe, he felt the whole urethra, and more eſpecially the neck of the bladder, much irritated; for which, however, he took nothing but a mercurial purgative, and rubbed into the perinæum ſome mercurial ointment every day. Theſe ſymptoms, together with the running, were nearly gone in eight days time, leaving only a little ſoreneſs in the perinæum behind. But the complaint for which he now conſulted me was a pain in the xyphoid cartilage, ſo violent indeed that he even could not bear the touch. I adviſed him to rub in ſome more mercurial ointment into the perinæum for two days. When I ſaw him again, the pain was not milder; but it had left its former place, and occupied now the middle of the ſternum, which troubled him much, eſpecially laſt night. I adminiſtered him a courſe of mercury; by the uſe of which this complaint diſappeared in a ſhort time after.

THUS far I have anſwered the arguments which were adduced to prove that the clap is never of a venereal nature; or, in other words, that it never proceeds from a poiſon of the ſame nature with the

gia. But Captain King, who made the late voyage round the world with Captain Cook, aſſured me that this was falſe, and that he himſelf had ſeen many of them with the matter dripping from their urethra.

lues. But though I have ſhown that this doctrine is exceptionable, yet I am far from maintaining, that all claps ariſe from the venereal virus. On the contrary,

III. I AM convinced, from experiments made on myſelf, and from obſervations made upon others, "*that blennorrhagias ſometimes ariſe from other acrimonies, or ſtimuli, applied to the urethra, with nearly the ſame ſymptoms as we obſerve in a venereal one;*" nay, I am now even inclined to believe, that ſuch claps may ſometimes be propagated as well as venereal ones. Whether the gonorrhœas, of which we have an account in ſome ancient writers, were of that nature, I am unable to determine; and therefore forbear to enter upon the ſubject. I ſhall only juſt obſerve, that the blennorrhagias I am here ſpeaking of, are very different from the flux of real ſemen, or from the flux of mucus from the proſtate gland. Theſe latter complaints, ariſing chiefly from a weakneſs of the excretories of theſe parts, occaſioned by an abuſe of venery, and eſpecially by manuſtupration, do not come within my preſent plan.

I PROCEED, therefore, to the main point, viz. to prove, that local inflammations of the urethra, accompanied with a running, commonly called Gonorrhœa, are not always, either in men or women, of a venereal nature. This idea firſt occurred to me from having frequently obſerved in ſtone-horſes a kind of running of a greeniſh-yellow matter from the urethra. This running, which ariſes from cauſes ſtill unknown to me, I have ſeen laſt only for a few days, and then

go

go off ſpontaneouſly. The ſame, and that more frequently, I have obſerved in dogs, without perceiving that they ſeemed to ſuffer much pain from it; and though indeed they continued to lick the part almoſt conſtantly, they were never affected with any ulcer of the mouth. I have beſides, for theſe many years paſt, been conſulted, by a variety of patients, for runnings very much ſimilar to venereal blennorrhagias, but often ſo mild in their ſymptoms, and ſo ſhort in their duration, that I began to doubt of their venereal nature. I have ſeen married people, who lived together in the moſt perfect harmony and friendſhip, where the one was affected with ſuch a diſcharge for ſeveral days, without communicating the leaſt ſymptom to the other. With ſome of them I have been moſt intimately acquainted; and convinced beyond any doubt, that they were faithfully attached to each other; and that therefore the diſeaſe muſt have been owing to ſome other cauſe.

All theſe obſervations taken together, led me to believe, that ſome kinds of theſe runnings might perhaps owe their origin, not to the venereal poiſon, but to ſome different cauſe, either external or internal. I began to ſuſpect, that a diſcharge might be produced by any ſtimulus applied to the urethra, whether venereal or not, provided it was ſufficiently acrid to excite an inflammation, and conſequent preternatural ſecretion of mucus from the urethra; juſt as coryzas, accompanied with a large preternaturally coloured ſecretion from the mucous membrane of the noſe, ariſe from other cauſes. Having revolved theſe ideas in my mind for ſeveral years, I determined at laſt

laſt to try an experiment upon myſelf, which ſhould either confirm the theory I had laid down, or entirely overthrow it. With this view, I took ſix ounces of water, and dropped into it as much of cauſtic volatile alkali as gave the mixture a very ſharp fiery taſte. This liquor I injected into the urethra, compreſſing the canal with the fingers of my other hand below the frænum, that it might be prevented from going further, and thus be applied to the very part which is generally the ſeat of the clap. The moment it touched the inſide of the urethra, I felt ſuch an inſupportable pain, that I could not retain it for a ſingle ſecond; but withdrew the ſyringe, much againſt my will, almoſt at the inſtant of the injection, and the injected liquor ran out. But though the pain continued very ſevere for half a quarter of an hour, I reſolved to make a ſecond trial. It occaſioned a more ſevere pain than I ever remember to have felt in my life before, yet I retained it for very near the ſpace of a minute; when the pain became ſo excruciating that I could bear it no longer, and therefore withdrew the ſyringe. I inſtantly felt a ſtrong deſire to make water; but having taken this precaution before I made the experiment, I ſuppreſſed the inclination. I lay down on my ſofa, and waited the event with patience; but ſo volient was the pain, that it was near an hour before I was able to move. I then amuſed myſelf with reading during the remainder of the afternoon, eat my dinner as uſual, but went early to bed. I was now obliged to make water, which I had not done ſince the time of injecting the liquor. When the urine came to the place to which the injection had been applied, I felt a very

ſevere

ſevere pain, but leſs violent than what I expected. Having ſlept well during the night, I examined the part as ſoon as I awaked next morning, and found a pretty large diſcharge of puriform matter, of the ſame greeniſh-yellow colour with that in virulent claps. The pain in making water was now greatly increaſed, and the following night my reſt was interrupted by painful involuntary erections. The morning after, the diſcharge was much more plentiful, nearly of the ſame colour, only perhaps a little more greeniſh; the pain in making water, however, was now ſo violent, that I reſolved to mitigate it by injecting ſome lukewarm oil of almonds. By this it was greatly abated; the running continued five days, the pain all the while growing remarkably leſs in the part affected. But I now obſerved very diſtinctly a new inflammation taking place, lower down in the urethra, where I had felt nothing before, and where none of the injection had touched. This new inflammation began, as it ſeemed to me, at the very border of the former, extending itſelf lower down in the urethra; and was followed by a copious diſcharge, attended with the ſame ſymptoms as before, and continued for ſix days; at the end of which all the ſymptoms were greatly abated. But now, to my ſurpriſe, I felt diſtinctly the ſymptoms of a third inflammation taking place, extending from the border of the former about the caput gallinaginis to the very neck of the bladder, and attended by an ardor urinæ, and copious diſcharge like the preceding. At this I was ſeriouſly alarmed; for I had conſtantly injected the warm oil of almonds three times a-day. I perceived that the inflammation firſt excited by the

cauſtic alkali was moſt evidently communicated from one part of the urethra to the other; whence I was afraid, that an inflammation of the whole internal ſurface of the bladder might at length enſue, and be attended perhaps with dangerous conſequences. In this ſituation I continued betwixt hope and fear for about ſeven or eight days; when I found at laſt, to my great ſatisfaction, this inflammation gradually abate, together with the diſcharge, without paſſing the limits of the urethra; and I was perfectly freed from every ſymptom of theſe three diſtinct blennorrhagias, as I might call them, at the end of the ſixth week.

I SINCE have ſeen ſeveral convincing inſtances of blennorrhagias, accompanied with a diſcharge of yellow-greeniſh matter and ardor urinæ, which undoubtedly were not venereal, becauſe they diſappeared in three, four, or eight days time without any remedy, and without leaving any ſymptom behind.

A PARTICULAR friend of mine, a phyſician, being radically and perfectly cured of venereal complaints which he was formerly affected with, married, and enjoyed for three or four years a perfect ſtate of health; when one morning he found himſelf affected with a running ſimilar to that above mentioned. He lived, as may be eaſily imagined, for ſeveral days in the greateſt agitation of mind, having no other perſon to ſuſpect but his wife; with whom he at laſt inſiſted upon ocular demonſtration. He found her ſo as ſhe told him, perfectly healthy, which compoſed his

his mind; but to his great ſurpriſe, four or five days after, the running ſtopped, and he was perfectly well. The ſame accident, with the ſame ſymptoms, happened to him afterwards in the courſe of many years marriage with the ſame woman ſeveral times, always laſting from two to three, or five days, and conſtantly then diſappearing of itſelf.

From this experiment upon myſelf, together with the ſeveral obſervations mentioned, and from a very curious caſe related in a diſſertation publiſhed by Dr. Oettinger of Tubingen, where a diſcharge from the urethra, apparently ſimilar to that of a virulent clap, was produced by the internal uſe of olive oil, which had been wrung out of red Turkiſh yarn, on which it had been poured ſome days before, the reader may judge, whether acrimonious ſubſtances, of a different kind from the venereal virus, ſuch as cancerous ichor, or perhaps other ſtimuli, applied to the urethra, may not ſometimes produce the ſame ſymptoms as the cauſtic did in my experiment, and the oil in Dr. Oettinger's obſervation. I certainly believe, that runnings ſimilar to a clap excited by the venereal virus, are ſometimes produced from other cauſes, only perhaps with milder ſymptoms, and of ſhorter continuance; though on myſelf I could not perceive any difference either in the colour and conſiſtence of the matter, or other circumſtances. And I now look upon the following facts as thoroughly eſtabliſhed. viz. 1. That blennorrhagias frequently ariſe from the ſame venereal poiſon applied to the inſide of the urethra, which, when applied to the glans, prepuce, &c. produces ſhankers; or when abſorbed

into the ſyſtem, produces the lues: and, 2. That there are blennorrhagias which owe their origin either to acrimonious ſubſtances introduced into the urethra *ab extra*, or perhaps ſometimes to a more violent mechanical ſtimulus ariſing during coition, or from ſome other cauſes hitherto unknown to us. Hence I divide the *blennorrhagia* at leaſt into two ſpecies, eſſentially diſtinct from each other, viz. that ariſing from the venereal virus, which I call *blennorrhagia ſyphilitica;* and into that ariſing from other acrid ſubſtances, to which I give the name *Blennorrhagia ab acri, aut ſtimulo mechanico.* By atttending to this difference, our practice muſt be regulated as long as we are not thoroughly acquainted with the nature of other cauſes. It is owing to the neglect or ignorance of this diſtinction, that we hear quacks daily extolling the pre-eminence of their noſtrums or ſecret injections for curing the clap in a few days, while patients ſometimes complain of being kept by the moſt experienced phyſicians for weeks together, though affected with what they imagine to be the ſame complaint.

The running which a gentleman of my acquaintance got ſome years ago, notwithſtanding, as he ſaid, he made uſe of the beſt preventative of all, was undoubtedly not from a venereal cauſe; and he may be equally affected in time to come with the ſame complaint, though he now thinks himſelf ſafe, by what he calls *doubling* his precaution.

These facts, which I do not recollect of having been aſcertained by any writer before or after my publication,

publication, ſeem to me to be of importance to mankind in general. By a proper and due conſideration of theſe facts, the happineſs of many married or unmarried couples will be for the future not ſo eaſily ſhaken or diſturbed by imaginary and groundleſs ſuſpicions; and many people will be preſerved from falling a prey to ignorant practitioners, who, following the common routine of treating all claps by a courſe of mercurials, not only plague the patient with a heap of uſeleſs or hurtful drugs, but thereby often lay the foundation to a number of very diſagreeable complaints.

To the ignorance or neglect of this diſtinction between Blennorrhagias excited by the venereal poiſon, and thoſe ariſing from other ſtimuli, we are likewiſe to aſcribe the great difference among practitioners with regard to the mode of treatment. Some adviſe aſtringents, while others are laviſh in their praiſes of emollients. Hence, even ſome practitioners of eminence, having obſerved that aſtringent injections had been of ſervice in ſome caſes, even in the ſtage of inflammation, recommend them to every patient affected with that complaint, but by no means with the ſame ſucceſs in all caſes. For, beſides violent pains in the whole courſe of the urethra, ſwelled teſticles, an acute ſuppreſſion of urine, &c. which are the frequent effects of theſe injections, if the diſeaſe is of a ſyphilitic nature, and eſpecially in its inflammatory ſtage; ſtrictures in the urethra of the moſt troubleſome and obſtinate kind are often the conſequence. By overlooking this neceſſary diſtinction, which applies to men as well as to women, the ſtate

of the patient is ſometimes not only endangered, but the happineſs of married people, and the friendſhip betwixt the two ſexes, without juſt cauſe, frequently deſtroyed. I have certainly ſeen more than one inſtance of this kind.

THE *ſimple ſyphilitic Blennorrhagia* ought further to be diſtinguiſhed from the *complicated*, or that accompanied with an ulcer in the urethra: the latter admits no radical cure without the internal uſe of mercury; whereas the former ſeldom or never requires it.

SOMETIMES, by the violence of the irritation, the ſecretion of mucus ſeems to be totally ſuſpended, or at leaſt conſiderably diminiſhed, ſo that no diſcharge, or only a very ſmall one, takes place, though the other ſymptoms rage with the utmoſt violence. In this caſe, the diſeaſe has obtained the very improper name of *gonorrhœa ſicca*, as if we were to ſay, *fluxus ſeminis ſine fluxu*. Another ſymptom is a violent pain during erection, from the tenſion of the frænum, which has obtained the peculiar name of *Chordeé;* but as theſe diſtinctions denote only the violence of ſome particular ſymptom, there is no occaſion for retaining them.

I SHALL only add here one remark more. It is by moſt people imagined, and ſeveral medical writers have even publicly aſſerted, that the *malignity*, as they call it, or the *virulence*, of a clap, is always in proportion to the colour of the matter diſcharged; and that as ſoon as this colour changes into a whiter one, the diſcharge is no more infectious. But this appears

pears to me by far too general a concluſion: for in ſome perſons I have ſeen the matter retain its original brimſtone colour to the very laſt day. The more certain ſigns of the abatement of the virulence of the diſeaſe are, the ceſſation of the ardor urinæ, and a capability of retaining the water as when in health; the matter becoming leſs, and of a thicker conſiſtence, ſo that it grows ropy, and may be drawn into threads between the fingers; and the abſence of pain or titillation during erections. The only certain ſigns, however, of a radical cure of this diſeaſe, and of a perfect ſecurity of not being able to communicate the infection, are, the entire ceſſation of the running; erections and excretion of ſemen without any kind of pain, titillation, or heat in the urethra: And though in general we may aſſure our patient, that the change of the greeniſh-yellow colour to a white one is not an unfavourable ſign of the diſeaſe growing better, he ought to be cautioned, that it is by no means a certain one of the venereal virus being entirely eliminated.

HAVING thus finiſhed my conſiderations about the nature and the different kinds of blennorrhagias, we now proceed to

The Method of Cure.

HERE we muſt take notice of what has been eſtabliſhed before, that every kind of clap or blennorrhagia, is a local inflammation with a mucous diſcharge, excited by a peculiar poiſon, acrid matter, or ſtimulus. Hence the following indications will naturally

naturally preſent themſelves for all the different kinds of blennorrhagias, viz.

1. To remove the acrid matter or poiſon.
2. To defend the tender parts from its virulence or irritating nature.
3. To allay the irritation occaſioned by the virus; or, if poſſible, to change its nature.

The firſt point nature provides ſufficiently for; and there remains little to do for the phyſician, but only not to diſturb nature in this ſalutary attempt.

The ſecond and third points will be moſt effectually anſwered by lukewarm oily or mucilaginous injections *, together with the internal uſe of ſome mucilaginous drink; or (what is perhaps preferable) by the ſole internal uſe of the ſolutio Arabica, emulſio amygdalina, infuſum of hemp-ſeed or malva, &c. cold or luke-warm, taken in as large quantities as the patient can bear without loading the ſtomach, with an anodyne draught at night, according to circumſtances. Theſe remedies are always uſeful; and for patients who have an averſion to injections, abſolutely neceſſary.

If ſymptoms of an inflammatory fever appear, bleeding

* If we meet with patients who are prejudiced againſt the uſe of injections, and wiſh to be treated by internal medicines, we ought to acquaint them, that the diſeaſe may be cured equally well without any topical application; but that it will then require, perhaps, a little longer time, and the obſervance of a more exact regimen.

bleeding may ſometimes be uſeful; but in general, more ſervice will be derived from topical evacuations by means of leeches, and from emollient and ſedative fomentations and poultices. The poultices are to be applied in the manner mentioned hereafter under the article *Phymoſis*.—On the other hand, when the patient is of a weak and irritable habit of body, the diſcharge very thin and copious, attended with violent pain and a quick pulſe, I have found the Peruvian bark, given internally, according to circumſtances, with or without opium, more uſeful than the whole tribe of antiphlogiſtics; and opium given in emollient glyſters is ſometimes particularly uſeful in ſuch caſes. By the uſe of this medicine, the frequent painful erections are alſo much mitigated; but their return ought, as much as poſſible, to be prevented, by tying the penis down, lying on a matraſs on the ſide, and not in a warm feather-bed on the the back. If the erection be attended with a ſtrangulation of the glans, the treatment laid down under the article *Paraphymoſis* will be neceſſary.

In order to avoid the more violent ſymptoms of this diſeaſe, the patient ought, during its inflammatory ſtate, to uſe as little exerciſe as poſſible, to wear a ſuſpenſorium ſcroti from the beginning of the diſeaſe, and to keep the part affected as much as poſſible from the cold air. The ſuſpenſorium ſcroti, or truſs-bag, may perhaps ſeem ſuperfluous: but being ſo little troubleſome when well applied, and ſo well calculated to prevent a ſwelling of the teſticles, I never neglect to recommend it, eſpecially to thoſe who have once laboured under this latter diſeaſe. To prevent

prevent any of the diſagreeable conſequences of a clap, ſuch as painful erections, chordee, paraphymoſis, ſwelling of the teſticles, or complaints of the inferior parts of the urethra, the beſt method perhaps would be to wear a proper bandage or bag round the penis united to the truſs-bag; by means of which the penis might lie, if I may uſe the expreſſion, like in a caſe or ſhell, defended at the ſame time againſt all external injuries, ſuch as cold, friction in walking; and may be conſtantly kept clean by renewing lint frequently; the beſt means to prevent ſhankers, and likewiſe to avoid dirty linen. When the patient is obliged to make water, there is a hole left at the end of this caſe, and he has nothing to do but to looſen the ſtraps or to draw the ring of it backwards, and to take out the lint forwards.

With reſpect to the regimen to be obſerved during claps, exerciſe, external cold, high living, drinking ſpirituous liquors, and eſpecially the frequent touching the part affected, ought carefully to be avoided by all patients; but eſpecially by thoſe of a phlogiſtic habit of body, as they generally ſuffer more, and for a longer time, from this diſeaſe than others. Such patients ſhould confine themſelves to a low diet, rather of the farinaceous than of the animal kind; they ſhould eat no ſupper, and drink nothing but cooling mucilaginous liquids; whereas thoſe of a different conſtitution are not to be reſtrained ſo much.

Neutral ſalts have been formerly recommended to cool the blood, and to promote the ſecretion of urine, by which it was thought to mitigate the inflammation

ſtammation, and aſſiſt nature in the expulſion of the virus. But I have conſtantly found them to be hurtful. They increaſe the ſecretion of urine, render it ſharper, and thus augment the irritation, without producing any of the good effects aſcribed to them. However, in ſome caſes, the *pulvis ad Blennorrhagiam* mentioned below, may have its good effects.

A PREJUDICE in favour of purging in claps has alſo long prevailed. For this purpoſe, ſome have uſed the mild, and others the more draſtic kinds of purgatives; and calomel eſpecially has been recommended to be given every two or three days. Neither of theſe medicines I ever ſaw do any good, but frequently much harm. Beſides their tendency to promote the abſorption of the poiſon into the ſyſtem, like improper injections, they often give riſe to ſwelled teſticles, diſeaſes of the proſtate gland, ſuppreſſion of urine, ulcers of the urethra or bladder, &c. However, though purging is always improper, the body ought to be kept open, ſo that the patient may have a ſtool regularly, which is beſt effected by the *mixtura laxans* or *pilulæ laxantes;* and I have no doubt that it is partly owing to this improvement of our practice, that we now ſo ſeldom obſerve ſymptoms of the lues, or ulcers of the bladder, following a clap.

THUS far with regard to the more general run of the diſorder; but venereal Blennorrhagias are not always ſo ſimple. Sometimes the poiſon ſeems to be of a more exalted acrimony, or rather meets with conſtitutions of a more irritable nature; or, as is

frequently the caſe, the ſymptoms are exaſperated by improper treatment, or by neglecting the above-mentioned rules. In theſe circumſtances, the patient feels a more violent heat and pain in making water, accompanied with a tenſion of the urethra along its whole length; a perpetual deſire of making water, without being able to paſs more than a few ſcalding drops at a time; frequent erections, with moſt exquiſite ſhooting pains throughout the whole length of the urethra, but more eſpecially at the frænum. Sometimes ſtreakes of blood, or real blood, are diſcharged with the urine; and evident marks of an ulceration of the urethra make their appearance. In this caſe, beſides the above-mentioned remedies, the uſe of mercurial fumigations or frictions on the perinæum, and inſide of the thighs I have found to be one of the moſt efficacious remedies.

The ſame treatment will prove ſerviceable, if, by any cauſe whatſoever, the diſcharge of the venereal Blennorrhagia, during its inflammatory ſtage, be ſuppreſſed or ſtopped, either by acrid or aſtringent injections, or even by the moſt proper injections, applied in an improper manner, by draſtic or repeated mild purges, by the premature uſe of turpentine or balſamics, by violent exerciſe, and eſpecially by catching cold in the part affected. The virus, in theſe circumſtances, ſeems to leave its natural ſeat, the lacuna Morgagni under the frænum, and to ſettle lower down, where the excretory ducts of the ſeminal veſſels and proſtate gland open into the urethra, and there excites a ſwelling in one or both teſticles;

teſticles; or, if it has been driven ſtill lower down to the neck of the bladder, the patient has a continual deſire to make water, without being able to paſs any, or only a few drops at a time. He is then often unable to ſtand upright for a quarter of an hour; and a total ſuppreſſion of urine is in this caſe frequently the conſequence. In all theſe different places, the poiſon generally produces only a ſuperficial inflammation; though not unfrequently alſo, by its virulence, or want of a ſufficient quantity of mucus to dilute it, an excoriation and ulceration in the urethra, which then never fails to end in an obſtinate gleet, and to be followed by a general infection of the maſs.

In ſpeaking of the dreadful conſequences of a ſuppreſſed or ſtopped venereal Blennorrhagia, I muſt not omit to mention a diſeaſe, perhaps the moſt melancholy of all venereal complaints whatever; I mean, that kind of inflammation in one or both eyes, frequently accompanied with a diſcharge of puriform matter, entirely ſimilar in colour and conſiſtence to that of a clap, and generally terminating in perfect blindneſs; or in other caſes, inſtead of an ophthalmy, a more or leſs perfect deafneſs. Though I am not able to account for the origin of thoſe complaints ſuddenly following the ſuppreſſion of a clap, eſpecially from ſevere cold (for I have never obſerved them but in very cold climates and ſeaſons), to which the patient had been previouſly expoſed, I am convinced of the fact, and ſhall ſpeak of it more fully hereafter, under the head of *Venereal Ophthalmy*.

The only remark more I have to make here is, that all theſe complaints from repelled venereal Blennorrhagias, being often attended with ſuch dreadful conſequences, a medical man of character, ought not to mind the opinion of others, but be guided in his conduct by juſtice and conſcience, and do every thing that poſſibly may be done to cure or relieve his patient labouring under theſe unhappy circumſtances. I therefore have tried, in four caſes of ſwelled teſticles and ſuppreſſion of urine, ariſing from a retropulſed clap, the inoculation of the venereal poiſon, by means of a bougie previouſly applied for about half an hour to a perſon afflicted with a clap, and then introduced into the urethra, with unexpected ſucceſs. This I do not recommend from fancy, as has been ſaid by a late writer: it is not my cuſtom, as the reader may judge from the whole tenor of this work, to indulge in fanciful theories; which I think hurtful both to the patient and to the young practitioner. The method propoſed has been tried many years ago in one of the firſt military hoſpitals in Europe with conſtant ſucceſs, and has been ſince confirmed by Dr. *Lange* in a treatiſe on Ophthalmia. Was I leſs cautious in drawing concluſions, and more ignorant of the obſervations made by other medical writers, I might probably be eaſily induced to ſwell my book by uſeleſs and fanciful theories into a large quarto.—We are conſulted for giving relief; and conſequently fulfil our duty, at leaſt, by offering a remedy, which the patient has always in his power to accept or refuſe.

CHAP.

CHAP. III.

On the Blennorrhoea, or Gleet.

By the name *Gleet** we commonly underſtand a continued running or diſcharge after the inflammatory ſymptoms of a clap have for ſome time diſappeared. A *Gleet* or *Blennorrhœa*, however, is properly, a preternatural diſcharge of puriform or limpid mucous matter, or of real pus, from the urethra in men, and from the orifice of the vagina in women, without pain, heat of urine, or any other ſymptom of inflammation.

Gleets ariſe chiefly from two cauſes: 1*ſt*, From ſimple relaxation of the mouths of the veſſels, which had been irritated, inflamed, and thereby loſt ſomewhat of their contractile power; or, 2*dly*, From an ulceration, or an eroſion in ſome part of the urethra. The

* This diſeaſe, which occurs in the Latin authors under the different denominations of *Gonnorrhœa benigna*, *G. non virulenta*, *G. inveterata*; *Leucorrhœa*, *Fluor albus*, *Fluor albus benignus*, I gave the more proper name *Blennorrhœa*, as if you were to ſay, Fluxus muci (*paſſivus*), or a diſcharge of mucus without any phlogiſtic ſymptoms; which name diſtinguiſhes it as well from the clap, to which I gave above the name *Blennorrhagia*, (*Fluxus muci actívus*), or a diſcharge of mucus with ſymptoms of inflammation, as from the real diſcharge of ſemen; which diſeaſe alone is properly called *Gonnorrhœa*.

The former may, with more propriety I think, be called *Blennorrhœa ſimplex*, and the latter *Blennorrhœa complicata*. See the Noſological Table.

In the former kind, after the inflammation and irritation occaſioned by the acrid matter have ſubſided, the veſſels, from which that diſcharge proceeded, continue to pour out either matter of the ſame puriform appearance, or only a clear kind of mucus, but ſomewhat thicker, in a preternatural quantity.—Sometimes a gleet begins to appear after coition, exerciſe, or free living, though the diſcharge from the preceding clap had entirely diſappeared ſome days or weeks before.

Gleets of this kind are for the moſt part only a local complaint, the ſimple remains of a clap not perfectly cured; but thoſe of the ſecond kind may be conſidered as the remains of a very violent or complicated and ill-treated or neglected clap, and are generally accompained with an infection of the maſs.

Hence it appears, that the nature and ſeat of gleets may be as various as thoſe of claps; but according to the place where they are ſituated, the time they have continued, and the cauſe by which they are produced, the method of cure muſt be different, and becomes more or leſs difficult and complicated.

Thoſe gleets are moſt eaſily cured which have their ſeat in the urethra under the frænum, in the lacuna mucoſa Morgagni: thoſe originating from ulcers of the urethra, and which have continued for ſome time, are

are much more obſtinate; and thoſe ariſing from eroſions of the excretary ducts of the ſeminal veſicles, or from a diſeaſed proſtate gland, or from ulcers of the bladder, are the moſt ſtubborn of any. In general, the further back in the urethra gleets are ſituated, the more apt they are to produce a difficulty in making water, or ſtrictures and ſuppreſſion of urine; and the more difficult, in general, is the cure.

I HAVE always found thoſe gleets which ſucceed a ſimple clap to be merely a local diſeaſe, and to owe their exiſtence ſolely to a relaxation of the ſmall veſſels after the inflammation has ſubſided, exactly ſimilar to the diſcharge of thick puriform mucus after the inflammatory ſymptoms of a coryza or catarrhus are gone off. But ſuch gleets as ariſe after violent, ill-treated, or neglected claps, are often accompained with an excoriation or ulceration of the urethra. In this caſe, generally the venereal poiſon has been abſorbed, and the maſs is of conſequence more or leſs infected.

As it is of the utmoſt importance, though ſometimes extremely difficult, to aſcertain theſe points, I ſhall endeavour to enumerate the moſt remarkable ſymptoms by which it may be known whether there is any ulceration in the urethra. They are ſhortly as follow: 1. Streaks of blood in the mucus, or real blood diſcharged, during the inflammatory ſtage of the clap, as above mentioned, but more eſpecially when continuing after the violence of the inflammation has abated. 2. Real pus, or a thin ichorous matter,

matter, diſcharged in a greater or leſſer quantity from the urethra. 3. A pain confined to one part of the urethra; but felt more particularly upon introducing the catheter, or preſſing on the urethra externally. 4. An acute pain in one particular place of the urethra, felt eſpecially in paſſing the laſt drop of urine, or in the emiſſion of ſemen.—Though all theſe ſymptoms pretty plainly indicate an ulcer, its exiſtence will be much more confirmed, if the preceding ſymptoms of inflammation have been very high; if the patient has neglected or hurt himſelf, or has been improperly treated; or even, as I have ſometimes ſeen, if the urethra has been wounded by a miſmanagement of the ſyringe, or a rude application of the catheter, during the inflammatory ſtate.

By not attending to theſe marks, which ſufficiently point out the exiſtence of an ulcer in the urethra, we ſhall be often diſappointed in the cure. Whenever, therefore, we are conſulted about gleets, our firſt buſineſs ought to be, to examine whether they ariſe merely from relaxation, or from an ulceration in the urethra; and in this latter caſe, whether the diſeaſe is univerſal or only local. If there is an ulcer, it will be neceſſary, in order to form a proper prognoſis, to aſcertain the place of that ulceration in the urethra.

When the diſeaſe is merely local, it may be cured either by external topical applications, or by internal remedies, or by both united. The beſt topical remedies I have found, are injections made of a ſolution of verdegris in volatile alkali, or of white vi-

triol

triol diſſolved in water, and mixed occaſionally with ſome grains of ſugar of lead; or of a ſolution of blue vitriol or alum; each of which may in certain circumſtances be uſeful. In many caſes, I have found a large doſe of calomel, prepared according to Mr. Scheele's proceſs, ſuſpended in a ſmall quantity of ſimple water or any mucilaginous fluid, injected five or ſix times a-day, preferable to any other remedy. *See the Formulas.* Of the internal remedies for the ſame purpoſe, I ſhall ſpeak hereafter.

If the diſeaſe be univerſal, viz. accompanied with an infection of the ſyſtem, as is almoſt always the caſe where there is an ulceration of the urethra, we muſt, beſides topical remedies, have recourſe to thoſe appropriated to the cure of the lues itſelf. In this caſe, it is impoſſible to cure the gleet till we have purified the maſs. After this is done, or while it is yet doing, I have found a ſolution of ſublimate and litharge in vinegar, or a ſolution of verdegris in volatile alkali, diluted with a ſufficient quantity of water, and injected two or three times a-day, a moſt excellent remedy.

With regard to injections in general, in Blennorrhagias as well as Blennorrhœas, I muſt make two material obſervations; the neglect of which may ſometimes occaſion our being diſappointed in the cure, even though the beſt remedies are uſed. The ſyringe made uſe of for this purpoſe ſhould have a ſhort but wide pipe, juſt ſo large that its orifice may go into the orifice of the urethra, but not further; and the piſton ought to apply cloſe to the ſides of the

tube. If the pipe of the ſyringe be ſmaller than the orifice of the urethra, it is always attended with two conſiderable diſadvantages. The firſt is, that with a ſmall pipe, eſpecially if not perfectly ſmooth, the patient eaſily hurts or wounds the inſide of the urethra; and thereby renders himſelf liable to an ulceration of that part, and conſequent abſorption of the poiſon. The ſecond is, that the liquid injected, inſtead of going into the cavity of the urethra, will, in proportion as the patient preſſes the piſton, run out ſideways through the orifice of the urethra. If the piſton itſelf does not apply cloſely to the ſides of the ſyringe, even if the pipe be ſufficiently large, ſo that it perfectly cloſes the orifice of the urethra, the liquor will regurgitate between the piſton and ſyringe, inſtead of going into the urethra; and thus the patient may imagine that he has injected the liquor properly, when perhaps little or nothing has entered the urethra. But though the ſyringe be properly made, and at the ſame time, the moſt careful inſtructions be given, patients do often perform the operation in ſuch an aukward manner, that no good effect is obtained.

The ſyringe, properly made, ſhould be applied cloſely and exactly to the orifice of the urethra; ſo that, by the conic form of its pipe, all paſſage may be denied to the liquid betwixt it and the ſides of the urethra. If the ſeat of the diſorder be in the uſual place of claps, viz. in the mucous lacuna, juſt under the frænum, the patient ſhould, with one hand, compreſs the urethra at the firſt curvature of the penis, where the ſcrotum begins; while he holds and manages the ſyringe with the fingers of the other. The

piſton,

piſton, which ſhould always fit cloſe, but ſlide eaſily, ought then to be preſſed very ſlowly and gently, till he feels the urethra gently diſtended; and thus keep the liquid injected for a minute or two in the urethra, repeating the ſame operation three or four times. By a raſh or longer continued preſſure of the piſton, the irritation thereby produced in the urethra often will do more harm than the injection does good.

By attending to theſe directions, a double advantage is obtained. The liquid is properly applied to the part affected, the urethra not violently diſtended, and at the ſame time no danger is incurred of driving ſome of the poiſonous matter lower down the urethra along with the injected liquor; but if the ſeat of the diſorder be lower down, the precaution of compreſſing the urethra behind is ſuperfluous.

With reſpect to the liquid itſelf, it ſhould always, in caſes of claps, be made lukewarm; but in gleets this is unneceſſary. In the former, if the liquid be too cold or too warm, it may eaſily hurt the patient, either by driving back the matter, or increaſing the inflammation. In many inſtances alſo the liquid ought to be well ſhaken before it is injected. It may eaſily be made warm, by putting a tea-cup full into a baſon of hot water. At all times, before any injection is applied, the patient ſhould attempt to make water.

The other obſervation I have to make is, that young men labouring under gleets, after having for ſome time uſed injections, and finding themſelves

conſiderably better, frequently grow careleſs in the application, and even ſometimes neglect the injection altogether for a day or half a day. The conſequence of this neglect is ſometimes very diſagreeable. For I have ſeen ſeveral inſtances, where, by a neglect of this kind for a ſingle day, the running has the day after ſo much increaſed, as if it had been a freſh gleet; and the relapſe being more obſtinate than the original diſeaſe, the patients were thereby obliged to continue the injections for more weeks than they would perhaps have required days to cure the diſtemper, had they continued the uſe of them without interruption. In general, in order to prevent any danger of a relapſe, I order my patients to apply the injections three, four, or, according to circumſtances, ſix times a-day during the diſeaſe, and to continue the ſame regularly for ten or twelve days after the running has entirely ceaſed.

Syringes of a different kind are required for women, if we wiſh to ſee any good effects produced by the injections adminiſtered to them, as I ſhall mention below, under the article of *Venereal Ulcers*.

Beſides injections, bougies will be often of great ſervice, nay, abſolutely neceſſary for curing the gleet, eſpecially when there is an ulcer in the lower part of the urethra. They may be uſed either alone, or in conjunction with proper injections. They ſhould be kept in, for the firſt three or four days, only for a quarter or half an hour at a time, until the patient be accuſtomed to them, ſo that he can bear them longer; and then they may be kept in for ſeveral

hours

hours in the morning and evening, or during the whole day and night. It muſt be left entirely to the judgment of the practitioner to determine whether the bougies to be employed ſhould be perfectly ſimple or of an irritating or ſedative quality; the circumſtances of the caſe will point out whether thoſe of the former or latter kind are neceſſary. It ought however, to be remembered, that before the application of bougies, as well as injections, the patient ought always to attempt to make water, in order to give the remedy time to produce its effects on the part affected. If the application of the bougie produces, as I have ſometimes obſerved, a tenſion and pain in the ſpermatic cord, or a ſwelling of the teſticle, it ought to be diſcontinued for a few days. This effect I have ſometimes alſo found to be produced by the uſe of too large a bougie, and to be removed by changing it for a ſmaller one. In general, ſmall bougies ſhould be preferred to large ones in the beginning. See Formulas, article *Cerei medicati.*

Should we be diſappointed in our expectations of a cure, either by the uſe of bougies or injections of the above-mentioned kind, it will be proper to inject ſuch liquids as may excite an irritation and inflammation in the urethra, eſpecially in the part affected. Theſe have often been attended with ſucceſs after the beſt aſtringents have failed. For this purpoſe, we may uſe the *injectio ad Blennorrhœam tertia* made ſtronger, or a ſimple ſolution of ſublimate in water, or a large doſe of calomel ſuſpended in water.

It

It has been obſerved by Dr. *Cullen*, that obſtinate gleets have ſometimes been cured by violent and long-continued exerciſe on horſeback; ſuch as a journey from Edinburgh to London: and it is probable that this cure is produced by exciting an inflammation in the parts, as the injections juſt now recommended are apt to do; Gleets have ſometimes been cured by coition; which may be accounted for on the ſame principles: but this is a remedy which can never be recommended by any practitioner; becauſe gleets are often infectious, and the venereal diſeaſe is by theſe means certainly communicated to an healthy woman; or, if ſhe be not healthy, the man would not only run the riſk of getting a freſh clap, but even the lues itſelf, if his gleet was owing to an ulcer in the urethra.

Besides the above-mentioned remedies, ſome others may be tried in gleets of the more obſtinate kind; ſuch as the tinctura cantharidum internally, or injections made with oil of turpentine, or with a decoction of tormentilla, or an infuſion of galls; a bliſter to the part affected, or to the perinæum. Mr. *Birch* has found gentle electrical ſtrokes paſſed through the part affected in ſome caſes effectually to produce a cure; and I have been informed by a friend, that he once ſaw a deſperate gleet cured by injecting the tincture of ipecacuanha. I can, however, ſay nothing with regard to the effects of theſe remedies, having never had occaſion to try them. I mention them only, becauſe we may be ſometimes at a loſs for medicines in very obſtinate complaints of this kind.

BATHING in cold water has alſo been recommended in obſtinate gleets, and I have ſeen ſometimes very good effects from it; but, in two or three caſes, it rather increaſed the running. The ſame has alſo been obſerved by others.—Sea-bathing is very beneficial; as likewiſe waſhing the genital parts with cold water, by itſelf, or mixed with vinegar.

THERE are three kinds of *internal* remedies made uſe of in gleets; each of which may be uſed, either alone or joined, as circumſtances may require, with the local applications above-mentioned. Theſe are,

1. *A courſe of mercurials.* This is always neceſſary where the diſeaſe ariſes from an ulcer of the urethra, eſpecially of a long ſtanding, or where a general infection has taken place. In ſuch caſes, pills made of turpentine and mercury are often very proper.

2. *Balſamics.* Such as balſamus Canadenſis, Tolutanus, Peruvianus, copaivæ, emecha, olibanum, terebinthina, or the aqua picea. Of theſe the moſt commonly uſed is the copaiva balſam; of which the patient may take from fifty to an hundred drops in a draught of cold water once a-day at noon, or twice a-day morning and evening. Immediately after the balſam, from twenty to fifty drops of Mynſicht's elixir of vitriol ſhould be taken, in the ſame quantity of water, to render the former leſs diſagreeable to the ſtomach. Half a drachm of pure turpentine, or a drachm of balſamum traumaticum, often anſwers the ſame purpoſe as the copaiva balſam. I knew an inſtance, where a very large quantity, from one to two ounces,

ounces, of copaiva balſam was ſwallowed at once by a young man, who was thereby radically cured of a moſt inveterate and obſtinate gleet.

3. *Corroborants.* Among theſe the tormentilla root, in powder or extract, the Peruvian bark in powder, or infuſed in red wine, or, which is ſometimes better, infuſed in lime-water, united, according to circumſtances, with iron, balſamics, or ſome other powerful aſtringent, ſuch as reſina kino, reſina draconis, &c. will ſometimes prove effectual when all other remedies have failed. After all, however, our utmoſt endeavours to cure an inveterate gleet will ſometimes be in vain; and there have been inſtances where nature has effected a cure in time, after the unſucceſsful and tedious exhibition of the moſt powerful remedies.

Obstinate gleets ſometimes originate, as mentioned above, from a ſingular cauſe; of which we have ſome examples in anatomical collections. This is, when two ulcers of the urethra happen to be nearly oppoſite to each other. In this caſe, ſome parts of them will inoſculate with each other, producing a kind of bands acroſs the urethra, with a ſmall ulceration below. Thus not only a moſt obſtinate running, baffling all medicines, is produced; but a difficulty of making water frequently takes place, and an impoſſibility of making it but in a very ſmall ſtream, or not at all. The only remedy in this caſe, if we have ſome reaſon for ſuſpecting this cauſe, is the chirurgical operation; though in ſome caſes, where the bands are not too ſtrong, they might perhaps

haps be broke by applying a probe or catheter. Whether or not the following caſe of a very troubleſome and obſtinate gleet belongs to this claſs, I leave my readers to judge.

Some years ago I was conſulted by a nobleman concerning a gleet, with which he had been affected for about ten years, and for which he had conſulted the phyſicians and ſurgeons in ſeveral countries. Sometimes it ſtopped for ſeveral days; then it came on again of itſelf, eſpecially after riding on horſeback or coition. At ſuch times he always felt ſome uneaſineſs, and the next day a little running, which went off till the ſame cauſe was repeated; which rendered him very uneaſy, eſpecially as he intended to marry. Upon examining the patient, I found the diſorder ſeated down in the urethra, about the place called the *Caput gallinaginis*. Every internal and external remedy that I knew of was applied without effecting a radical cure. I took the diſeaſe to be a callous ulceration; and, on this ſuppoſition, applied bougies for eight or ten weeks without the leaſt effect. Being obliged to continue my travels, I left him very little the better for what I had done; at the ſame time adviſing him, as he intended to go to Paris, to conſult there whomſoever he could expect any benefit from. The reſult, as he afterwards informed me by letter, was as follows: "After my "arrival at Paris, I conſulted, according to your ad-"vice, all the medical men of eminence in that city, "who rendered me more uneaſy about my diſorder "than I had ever been before, by their different o-"pinions of the cauſe, nature, and cure of it. Some

" adviſed me to a new mercurial courſe; others pre-
" ſcribed different internal and external medicines.
" I ſhowed them all the preſcriptions ſucceſſively
" tried by you; they ſeemed rather aſtoniſhed, that
" none of them, after a fair trial, had ſucceeded.
" However, ſome new injections and internal reme-
" dies were ordered, rather I think to ſatisfy me for
" my money, than in hopes of doing me any real ſer-
" vice; indeed, I was for three or four months en-
" tirely in the ſame condition as when I firſt came
" to Paris. But, ſurpriſing it may ſeem to you! the
" laſt perſon whom I conſulted upon recommenda-
" tion, ſeemed to me the moſt ignorant I had appli-
" ed to. He ſaid he was obliged to examine the
" paſſage of the urethra with a catheter, in order to
" aſcertain the place, &c. He accordingly applied it.
" It went in as uſual very readily, till it came to the
" ſeat of the diſorder, where it met with the ſame
" obſtacle it had always done, which I had before
" told him of. Notwithſtanding this, he endeavour-
" ed to puſh it further. I told him it gave me ex-
" ceſſive pain: but he preſſed it imprudently on, and
" it went through; upon which ſome blood immedi-
" ately run out of the urethra. This, as it ſeemed,
" much frightened him: he aſked my pardon, with-
" drew his inſtrument, took his fee, and departed;
" but left me much diſſatisfied for employing him.
" I expected I ſhould be worſe the next day, and ſuf-
" fer much from his unſkilful conduct: but quite the
" reverſe; I have been free from any diſorder theſe
" two months paſt. I ride on horſeback, and enjoy a
" woman, without finding any ill effects from them;
" and therefore think myſelf radically cured. The

" friendſhip

" friendſhip I owe you, for the trouble you took on " my account, obliges me to ſtate to you this particular " caſe; which may be of uſe to you, and which you " perhaps can better account for than thoſe I have " ſince conſulted."

Gleets, ariſing from deep and large eroſions of the mouths of the ſeminal ducts, or excretories of the proſtate gland, as alſo thoſe which originate from a diſeaſed proſtate gland, or from ulcers of the bladder, are often incurable.

In all inveterate and obſtinate gleets, which have their ſeat low down in the urethra, we ſhould carefully examine the proſtate gland; for to a diſeaſe of this part they frequently owe their origin. If the gland ſhall be found preternaturally ſwelled and hard after a mercurial courſe, repeated bliſters applied to the perinæum, with large doſes of the inſpiſſated juice of conium maculatum, or a decoction of mezereum, I have ſeen in ſome inſtances attended with ſucceſs where all other remedies had failed.

Of the treatment of gleets combined with ſtrictures, viz. with more or leſs difficulty in making water, I muſt refer to the chapter on *Iſchury*.

Gleets which ariſe either from a weakneſs, relaxation, or ſometimes perhaps from too great an irritability of the ducts of the ſeminal veſſels, are properly called by the name of Gonorrhœa *(fluxus ſeminis.)* In theſe caſes, a real ſemen is diſcharged, ſometimes without erection or any ſenſation of pleaſure: and is

either continually dripping off, or evacuated at times by debilitating nocturnal or diurnal pollutions. Sometimes it is diſcharged only on going to ſtool, when the hard fæces, during their paſſage in the rectum, preſs on the ſeminal veſicles and proſtate gland, and thus force the relaxed orifices of their excretory ducts. This diſorder, however, does not ariſe from any venereal infection, and but ſeldom from the abuſe of venery. The moſt general cauſe of it is manuſtupration, and therefore comes not within my plan at preſent. It requires a moſt prudent and careful treatment; otherwiſe the patient will fall a victim to that kind of conſumption which we call with Hippocrates *Tabes dorſalis*.

NOSOLOGICAL TABLE,

Illuſtrating the two preceding Chapters.

Claſ. *Locales.*

Ord. *Phlogoſes*, or *Mucifluxus*

Genus, BLENNORHAGIA. *Anglis*, Clap; *Germanis*, Tripper; *Gallis*, Chaude-piſſe; *Italis*, Gonorrhœa.

Character in Viris. Titillatio, præcipue in urethræ parte anteriore in lacuna Morgagni ſub frænulo; ſubſequente poſt biduum aut quatriduum, phlogoſi locali, cum ardore et dolore in mingendo; accedente ſtillicidio materiei purulentæ vel puriformis ex urethra; corpore cavernoſo urethræ præternaturaliter turgeſcente, plerumque cum erectionibus membri virilis ſolito frequentioribus dolorificis.

In Fœminis. Titillatio ad orificium vaginæ externum; ſubſequente poſt biduum aut quatriduum dolore, rubore et tumore præternaturali, præcipue (ad raphan) prope commiſſuram labiorum vulvæ inferiorem; accedente ardore et dolore ejuſdam partis in mingendo; cum ſtillicidio materiei puriformis ex vulva.

Gonorrhœa
——— virulenta
——— maligna
——— venerea
Fluor albus venereus, ſ. malignus
Leucorrhœa venerea
} auctorum.

Variat

Variat ratione ſedis.

	Materia fluente
Blennorrhagia balani	ex glande
——— urethralis	ex urethra,
——— veſicalis	e veſica,
——— labialis	e labiis vulvæ,
——— vaginalis	e vagina,
——— uterina	ex utero,
——— naſalis	e naribus.

Species ſunt,

Blennorrhagia ſyphilitica,
α. Simplex,
β. Complicata, ſ. ulceroſa.
Blennorrhagia a manuſtupratione.
——— ab acri externe applicato.
——— a ſtimulo interne applicato,
——— arthritica.
——— a calculo veſicæ.
——— a cancro uteri aut vaginæ.

Sequela Blennorrhagiæ eſt,

BLENNORRHOEA. *Anglis*, Gleet; *Germanis*, Nachtripper, weiſſer Flus; *Gallis*, Gonorrhée inveterée.

Character. Stillicidium humoris puriformis, aut muci limpidi, ex urethra in viris, ex orificio vaginæ in fœminis, præternaturalis, ſine libidine aut dyſuria.

Gonorrhœa benigna
——— inveterata
Fluor albus benignus
Leucorrhœa
} auctorum.

Variat ratione ſedis ut Blennorrhagia.

Species practico notatu neceſſariæ ſunt,

In viris: Blennorrhœa ſimplex, a relaxatione vaſorum.
——— complicata:
α Cum ulcere utheræ,
β. Cum ulcere aut ſcirrho proſtatæ.

In

In fœminis: Blennorrhœa a relaxatione aut debilitate vaſorum uteri aut vaginæ.
——————— ex blennorhagia prægreſſa.
——————— ex diæta laute et vita ſedentaria.
——————— a manuſtupratione.
——————— ab ulcere aut cancro uteri vel vaginæ.

Sequelæ Blennorrhagiæ ſyphiliticæ retropulſæ ſunt:

Tumor teſticulorum.
Iſchuria urethralis.
Bubo?
Ophthalmia.
Dyſecœa.
Fluxis puriformis ex oculis,
——————— ex auribus.
——————— e naribus.
Syphilis.

Genus, GONORRHOEA.

Character. Excretio ſeminis aut muci proſtatæ præternaturalis, potiſſimum ſine erectione et libidine; accedente dolore lumborum et atrophia.

Gonorrhœa vera
Pollutio nocturna debilitans } auctorum.
Excretio ſeminis involuntaria

Species ſunt:

Gonorrhœa a debilitate aut relaxatione vaſorum.
——————— ab ulcere aut eroſione ductuum excretoriorum proſtatæ et veſicularum ſeminalium.
——————— a nimia irritabilitate, potiſſimum per manuſtupprationem inducta.

CHAP.

CHAP. IV.

On the VENEREAL SWELLING *of the* TESTICLES.

WHEN a Clap has been treated either by improper medicines, or the patient labouring under it uſes violent exerciſe, or eſpecially if he catches cold in the part affected, by expoſing it to a ſtream of cold air, or by waſhing it with cold water, one, and ſometimes both teſticles begin to ſwell, often to an enormous ſize, attended with all the ſymptoms of a local inflammation; to which an irritation of the whole ſyſtem and violent fever not unfrequently ſucceed. This diſeaſe is called a Swelled Teſticle, and by ſome writers, though very improperly, Hernia humoralis.

PREVIOUS to the ſwelling, the running of the clap partly or entirely ceaſes; but, ſometimes, this will only happen, at leaſt to an obſervable degree, a day or two after the ſwelling has actually taken place.

THAT the ſwelling and ſymptoms of this inflammation are produced, in this caſe, merely by the irritation of the poiſon lodged lower down in the urethra, at the place where the excretory ducts of the ſeminal veſicles open, and not (as was formerly ſuppoſed) from an abſorption and tranſpoſition of the poiſon to the teſticle itſelf, is now generally admitted; and will perhaps be more evident from the obſerva-

tions

tions which I ſhall lay down upon the nature and ſeat of this diſorder, and from the new method of treatment which I found the moſt ſucceſsful for this complaint.

THERE is another ſpecies of this diſorder mentioned by ſome writers, viz. an inflammation of the teſticle, ariſing from the venereal poiſon being depoſited there from the maſs. This kind of diſeaſe never came under my obſervation, and I therefore can ſay nothing about it. We are alſo told, that a ſwelled teſticle ariſes ſometimes from venereal ulcers of the glans being dried up: but neither do I recollect to have obſerved any caſe of this kind; though I have ſeen a patient, who, two years ago, was affected with a ſwelled teſticle, which being improperly treated, brought on a fiſtula in ano. This was operated, and nearly healed up, when a ſwelling of the teſticle appeared again; for which I was conſulted. I ſucceeded in diſperſing the ſwelling, by bringing on a running from the urethra, and in compleating the cure by a courſe of internal remedies.

IT has been hitherto the general opinion, that the teſticle itſelf is always the ſeat of this diſorder. But, upon a more cloſe attention and inquiry, I found,

Firſt, THAT the teſticle itſelf is never ſwelled, or in the leaſt affected, in the beginning of this complaint; and that the only part affected and ſwelled is the epididymis; of which every patient may eaſily convince himſelf by a careful examination. I ſaid, the teſticle is never in the leaſt affected in the beginning,

or for the firſt five or ſix days; and if it becomes affected afterwards, it is enterly owing to a prepoſterous treatment. 2*dly*, I have conſtantly obſerved, that the fever which frequently attends this complaint, eſpecially in irritable conſtitutions, is never a primary diſorder, but only concomitant to, or the conſequence of, this local irritation; and that for this reaſon, by the method mentioned hereafter, it is almoſt generally in the power of the phyſician, if he be called in time, to prevent any fever from taking place in this complaint.

In what manner this ſwelling of the epididymis and ſpermatic cord is produced, is difficult to explain. Some think it is owing to ſympathy; others, to a certain quantity of poiſon abſorbed and depoſited to the teſticle; and others, to the inflammation ſlowly extending downwards to the neck of the bladder, and thus obſtructing the courſe of the ſemen. If it were owing to ſympathy, why does the ſwelling never happen as long as the diſcharge of a clap goes regularly on, though the ſymptoms of inflammation and irritation run ever ſo high? The ſecond cauſe aſcribed is a mere ſuppoſition, neither founded on facts nor anatomical obſervations. The third ſeems to be the moſt reaſonable; though it muſt be obſerved, that if the extended inflammation was the only true cauſe of this ſwelling, it would ſeem that every patient who has a diſeaſed proſtate, or an inflammation at the neck of the bladder, ſhould alſo be affected with a ſwelling of the teſticles; which, however, is generally not the caſe. It appears, therefore, moſt probable to me, that this diſeaſe is owing to the venereal poiſon being

being retropulſed from its original ſeat, in the lacuna Morgagni under the frænum, lower down the urethra, where, by its acrimony, it irritates the excretory ducts of the ſeminal veſſels; whereby the ſecretion of the ſemen is increaſed, but its excretion prevented, on account of the excretory ducts being irritated, contracted, and ſwelled: hence an accumulation of ſeed, firſt in the vas deferens, then in the epididymis, and at laſt in the teſticle itſelf. Hence, from this *diſtention* of the ſpermatic veſſels, not from any real inflammation of thoſe parts, a pain comes on, which, for this very reaſon, is always, we obſerve, obtuſe, never acute; and hence we often ſee the patient ſuddenly relieved by a ſpontaneous pollution. But if the ſame cauſe continues, the epididymis, and the teſticle itſelf, will become thereby affected; and its inflammation, if the poiſon irritating the excretory ducts of the ſeminal veſſels be not removed, will end in a ſuppuration or obſtinate hardneſs of the parts.

From the cauſe aſſigned, we clearly conceive how it happens, that, after the ſwelling of one teſticle is gone, the other is ſometimes attacked; and that, after a ſuppreſſion of urine from a retropulſed clap is removed, ſometimes a ſwelling of the teſticle comes on. It is owing to the tranſpoſition or change of place of the poiſon. It will further appear, from the nature of this diſorder, why a man who has been once affected with a ſwelled teſticle, is ſo eaſily affected with the ſame diſorder a ſecond time.

But all theoretical reaſonings are of little uſe, if they do not lead us to eſtabliſh a more rational and

effectual method of cure than has been before practiſed. When I therefore *firſt* obſerved, That this diſeaſe is not *originally* an inflammation of the teſticle, as has been hitherto generally ſuppoſed, but a ſwelling of the epididymis, as I have found to be the caſe in all my patients: *Secondly*, That the applications, otherwiſe very uſeful in topical inflammations, ſuch as poultices, fomentations, &c. were in this caſe of no uſe at all; nay, ſometimes even hurtful, as I have experienced in myſelf: *Thirdly*, That this ſwelling is brought on, by whatever cauſe, which ſtops the running of a clap; and moſt generally by catching cold, or cold applications to the penis, by violent exerciſe, or by aſtringent injections: *Fourthly*, That a ſwelling of the ſame kind is ſometimes brought on by the ſimple application of a larger bougie, and cured without any other remedy than by leaving off the uſe of the bougie—I was led, in conſequence of the above obſervations, to conclude, that the diſeaſe was brought on, not only by the venereal poiſon, but by any other ſtimulus applied to and irritating the mouths of the excretory ducts of the ſeminal veſſels in the urethra; and that therefore a new method of cure, altogether different from the old one, might be attended with better ſucceſs: and I was ſo happy as to find the ſame, after I had occaſion to try it, firſt on myſelf, and afterwards on other patients, anſwer my moſt ſanguine expectations.

Method of Cure.

The phyſician's firſt intention ſhould be to prevent the diſeaſe altogether; and if this ſhould be found impoſſible,

impoſſible, to cure it in the moſt ſafe and ſpeedy manner. To prevent a ſwelled teſticle, every thing that is apt to bring on a ſtopping of the running, or a retropulſion of the clap, ought to be carefully avoided. Such are acrid aſtringent injections, waſhing the penis with cold water, or expoſing it to the cold air; as, for example, making water in a ſtreet where a cold wind blows; violent exerciſe of any kind; the prepoſterous uſe of balſamics, internally or externally; purging medicines: Which points carefully attended to, together with the wearing of a bag-truſs, from the beginning of any clap whatever, have effectually ſcreened my patients from this diſorder; ſo that none of them who complied with the rules juſt mentioned was ever affected with this diſeaſe.

But we generally find our patients not ſo compliant, or we are called in to ſuch, who having been treated without any attention to thoſe rules, are actually affected with the ſwelling. Thoſe require our compaſſion, and the immediate application of every means poſſible to relieve them.

The cauſe of the diſorder, as ſaid above, being an irritation of the mouths of the excretory ducts of the ſeminal veſſels, from the venereal poiſon having taken its ſeat at the caput gallinaginis, the moſt effectual relief we can give to our patient will be, firſt to allay the irritation, and then to recal the poiſon to its former original ſeat, that is, re-eſtabliſh the running; both which points to attain, I found the following method moſt efficacious.

If the pulſe be accelerated, full, and ſtrong, the patient is to be bleeded immediately; and a good quantity of blood is to be taken from him; regard, however, being had to his conſtitution, and other circumſtances. If there be no irritation in the ſyſtem, or only a moderate degree of it, bleeding is unneceſſary (and this will be nearly always the caſe, if we are called in ſoon after the commencement of the diſorder); being convinced, from repeated obſervations, that the fever in this complaint is never an original diſeaſe, but brought on merely in conſequence of the irritation of thoſe delicate parts.

To the ſwelling a common poultice of bread and milk, with ſome oil, and, according to circumſtances, a little ſugar of lead, has been recommended by moſt writers: but having ſeen ſo little effect from this application, I have not, for many years paſt, made uſe of it. Inſtead of a poultice, I order firſt a glyſter, to evacuate the fæces, if the patient had not a natural ſtool; and then I adviſe him, if his ſituation will allow of it, to ſit for half an hour in a warm emollient bath. If he cannot have that convenience, he is to be placed in a perforated chair, upon the ſteam of hot water, for the ſame length of time; previouſly ſuſpending his teſticles. From thence he is to be carried to bed, and a dry bag-truſs to be immediately applied, in order to keep the teſticles conſtantly ſuſpended, as their hanging down produces or contributes to their irritation and ſwelling. A warm poultice may then be alſo applied to the penis, in order to recal the running again; or, in other words, to determine the retropulſed matter from its new ſeat to come

come back to the old one. But what I found principally to be relied on is, to adminiſter a full doſe of opium, or, according to circumſtances, a glyſter, made of equal quantities of linſeed-oil and barley-water, with forty or ſixty drops of laudanum, to be injected, and occaſionally repeated. He is to keep in bed and obſerve a low diet, drink nothing but barley-water, a decoction of figs and barley, or an emulſion of almonds.

To this method of treating ſwelled teſticles by opium, I was led, as I mentioned above, many years ago by a ſevere caſe of my own; and I have ſeen afterwards ſo good and ſpeedy effects from it, that I ſince conſtantly made uſe of it. I have had many inſtances, where, by theſe means, the ſwelling and pain of the teſticle were removed, and the running brought back, in the ſpace of twenty-four or forty-eight hours; and in thoſe caſes where it had not that effect ſo ſoon, it always greatly relieved the patient, and prevented a fever. In all more obſtinate caſes, I conſtantly obſerved, that the ſymptoms of irritation and the ſwelling did never quit the patient till the running of the clap came on again; but the moment this latter took place, the patient found himſelf relieved of the pain of the teſticle, and the ſwelling gradually diſappeared. To aſſiſt Nature in its beneficial efforts, the opium internally, or in an emollient glyſter, is to be repeated every twenty-four hours; the parts to be expoſed twice or three times a-day, for a quarter or half an hour, to the ſteam of hot water or milk; warm poultices to be conſtantly applied to the penis; and the accumulation of fæces in the rectum to be prevented by a common glyſter occaſionally

ſionally repeated. By proceeding thus, we ſhall generally have the ſatisfaction to cure, in a few days, a diſeaſe, which, by a different method of treatment, require ſo many weeks, and after all ſometimes ends in a ſuppuration of the teſticle, which often leaves a troubleſome ſcirrhoſity behind. Of late we have been told, that fomentations with cold water or ice, renewed every quarter or half an hour, anſwered beyond expectation in diſcuſſing a recent ſwelling of the teſticle; and in other caſes, the repeated cold application of a ſolution of ſugar of lead in water has produced the ſame happy effects.

If the ſymptoms of the ſwelling is dangerous or obſtinate, more efficacious means to re-eſtabliſh the running the ſooner might likewiſe be tried, and applied as mentioned above. The re-eſtabliſhed clap ought to be treated afterwards in the common manner; taking great care to give no occaſion to a new retropulſion; which, it is to be remarked, in ſuch caſes eaſily takes place a ſecond time.

If the ſwelling has been treated improperly, it frequently happens that the ſymptoms of irritation diſappear, but leave a hard ſwelling of one or both teſticles behind; and the diſeaſe is then commonly called a *Scirrhous Teſticle*. In all thoſe caſes I conſtantly found the epididymis very hard and much ſwelled. In ſome, however, the teſticle itſelf was likewiſe evidently affected, accompanied ſometimes with a ſenſation of a painful preſſure, but more frequently without any pain at all. Mercury rubbed in externally into the perinæum and ſcrotum twice a-day,

a-day, with the conſtant application of a warm poultice made of the root of *atropa mandragora L.* is, in that caſe, the moſt uſeful remedy. An emetic has been ſometimes found effectual. The decoction of the bark of the root of *daphne mezereum* internally, and a poultice of it externally, has lately been much recommended; but in ſeveral patients to whom I have given that decoction, I obſerved it made them ſo ſick that they found it impoſſible to bear it on the ſtomach, and even its external uſe requires ſome caution on account of its acrid quality. Electricity has been found uſeful in ſeveral caſes by Mr. *Birch*, in London. Van Swieten once told me, that he had given, for an indolent chronic induration of the teſticles, lapides cancrorum, an ounce in a pint of good Auſtrian wine or old hock, taking three or four table-ſpoonfuls every morning and evening, with good ſucceſs. I once tried this remedy, and it anſwered extremely well. After Van Swieten's death, I met a patient who told me, that he had been cured by him of an hard ſwelled teſticle, though not from a venereal cauſe, by the ſame remedy; and that he had been perfectly well ever ſince. An ointment made of one drachm of camphor to an ounce of ſimple ointment applied to the ſcrotum, and in other caſes the application of the volatile liniment by means of a feather, have proved ſucceſsful in ſeveral inſtances. Hemlock internally and externally has been likewiſe recommended; but upon what ground, I am uncertain. Mr. Acrell, one of the firſt ſurgeons in Denmark, has found the root of the *ononis ſpinoſa L.* given internally, anſwer extremely well in ſeveral caſes. He boils half an ounce

of this root with a pint and a half of water to one pint, ſweetens it with ſyrup of camomile, and gives a table-ſpoonful of it every three hours. The wearing of a truſs-bag is at the ſame time always neceſſary. It is, however, to be obſerved, that we ſhall ſometimes be diſappointed by all theſe remedies; and that the hard ſwelling, of ſeveral months or years ſtanding, will not go off, except we have recourſe to the inoculation of a new clap.

A *cancer of the teſticle* requires extirpation; but whenever a teſticle is cancerous, or, in its ſtructure, diſeaſed, we ought always carefully to examine whether the lymphatics of the ſpermatic cord are not at the ſame time affected; in this caſe, the kidney of the ſame ſide, to which thoſe lymphatic veſſels go, being generally diſeaſed, the exciſion of the teſticle proves an uſeleſs operation, and will only expoſe, by its fatal conſequences, the ſurgeon's reputation.

We are told by ſome writers on this ſubject, that a venereal inflammation of the teſticles frequently terminates in a ſuppuration. This may ſometimes be the caſe, but never happened to any of my patients. I am therefore inclined to believe, that, if it happens, it more frequently proceeds from a bad treatment, than from any other cauſe. But perhaps that ſpecies of venereal teſticles which, we are told, ariſes from a tainted maſs, (if it ever exiſts,) is probably, having its ſeat in the teſticle itſelf, more apt to end in ſuppuration, than that ariſing from a ſuppreſſed clap, which, as we have ſeen above, very ſeldom affects the teſticle. One particular caſe, which

which I ſaw eight years ago, though not venereal, deſerves, perhaps, to be mentioned here.

A YOUNG man of twenty years of age, afflicted with ſcrophulous ſwellings about his neck, was adviſed by a phyſician to make uſe of the decoctum lignorum. Following this advice for ſome weeks, he was affected with a cough, which, in a fortnight after, ended in an hæmoptyſis. Though he now left off the decoction, and made uſe of ſeveral other medicines preſcribed to him, the cough continued for many months, accompanied with ſpitting of blood, or mucus ſtreaked with blood occaſionally. Being conſulted, I gave it as my opinion, that his lungs were affected with ſcrophulous tubercles, for which I knew no remedy; and deſired him to conſult the firſt men of the profeſſion in the place. Though the remedies ordered by them did not in the leaſt alter his cough, he was in other reſpects tolerably well, eat with appetite, and ſlept with eaſe. One day he came to me, and complained of a painful ſwelling on both ſides of the inguina, but more ſo on the one than on the other. Upon examining, I found the ſpermatic cord very much enlarged. I aſked him, whether he had made free with the ſex? He declared upon his honour, he had never lain with a woman in his life, for fear of being poxed; but ſaid, he had had the ſame complaint ſeveral times before, and felt it always whenever he was in company with young women who ſtrongly excited deſire; that it grew ſometimes extremely painful, inſomuch that he avoided ſuch occaſions as much as poſſible. Having been in ſuch a ſituation the day before, the ſame

pain came on; but had continued ſo much longer than uſual, that it induced him to apply to me for aſſiſtance. I adviſed him to apply cold water to the parts: which cured him of his complaint in a few days. Thus much I thought to premiſe to what follows.

Some months after, he complained to me that one of his teſticles had become very hard without any apparent cauſe. Upon interrogating him about the uſe of women, he repeated the ſame thing he had done before; but confeſſed that he had frequently maſturpated himſelf, without knowing that ſuch a practice could produce any diſorder. I preſcribed hemlock, and all the reſolvents the Materia Medica affords, both internally and externally, but without any effect: the teſticle grew painful, and daily larger; and at laſt burſt, and a ſmall quantity of purulent matter was diſcharged. On my return to town, after an abſence of ſome months, he told me, that during that time a ſmall diſcharge had continued; and that ſeveral fibres like white threads came away from the ulcer every day. Upon examination, I found the whole teſticle reduced to a very ſmall ſize, and the ulcer nearly cloſed up, and in a few weeks it was quite healed. His cough continued during all this time; but he appeared not to be more emaciated than when he firſt applied to me. Every three or four months, when the tickling of the cough ſeemed to increaſe, and he was afraid of a ſpitting of blood, he was bled by his own advice. The ſpermatic cords were quite natural. The ſame month of the following year, the other teſticle became affected

juſt

juſt as the former had been. A ſurgeon of eminence, who had treated the patient with me the preceding year, was now called in during my abſence; and though every thing was done for him which in my opinion could have been done, when I returned back to town, the complaint ſtill continued, and had now laſted for ten weeks. At the expiration of the ſeventh week the teſticle burſt; and whole pieces of the ſpermatic veſſels of the teſticle were every day diſcharged from the opening; and in three months the teſticle was reduced, like the other, to the ſize of a ſmall hazel-nut. There was no ſwelling in the ſpermatic cords; and the patient told me, he had ſtrictly followed my advice, and avoided, for theſe two years, his bad cuſtom above mentioned. The cough continued; but by degrees reduced him ſo low, that he died two years after.

The phyſician who attended him laſt, informed me, that on opening the body, he found a vomica in one of the lungs, and many large hard tumours or tubercles on both; but he had not examined the teſticles. From what cauſe the diſeaſe of the teſticles aroſe, whether from a ſcrophulous complaint, or from maſturpation, I do not pretend to ſay: but I relate the caſe only as a very particular and remarkable one; which ſhows, that there may ſometimes happen a ſuppuration of the teſticles even with the greateſt care and moſt judicious treatment.

CHAP.

CHAP. V.

Of the INFLAMMATION *and* INDURATION *of the* PROSTATE GLAND.

I HAVE nothing in particular to ſay on the inflammation of the proſtate gland, except when it ariſes from a ſuppreſſed Blennorrhagia. In that caſe, we ſhould uſe every means poſſible to reſtore the running, particularly thoſe recommended for ſwelled teſticles ariſing from the ſame cauſe; becauſe, if this inflammation terminates in ſuppuration, whether the abſceſs breaks into the urethra, bladder, inteſtinum rectum, or perinæum, it is always attended with very diſagreeable conſequences. The ſymptoms of an inflammation or ſwelling of this gland are known from the pain and difficulty in making water; beſides, if we ſhould be doubtful whence they proceed, the finger will almoſt always clearly tell us. If a ſuppuration has already taken place, we have only to obſerve, that mercury internally and externally will be neceſſary, and afterwards proper injections; the compoſitions of which are not peculiar, and are to be left to the judgment of the practitioner.

IN the induration or ſcirrhoſity of this gland, the remedies recommended for indurated teſticles or buboes are to be made uſe of; but eſpecially bliſters, repeatedly

repeatedly applied to the perinæum, and internally the hemlock in large doſes.

If a total ſuppreſſion of urine is to be dreaded from the ſcirrhous ſwelling of the proſtate, as is always ſooner or latter the caſe, every means poſſible ought to be tried to bring on a ſuppuration of the gland, in order to prevent ſtill more diſagreeable conſequences. There is, however, to my knowledge, hardly any diſorder which baffles more the ſkill of the phyſician than a fungous excreſcence or ſcirrhous ſwelling of this gland, whether from a venereal or any other cauſe. The root of the atropa mandragora, or the daphne mezereum in a poultice, and repeated bliſters, or a ſeton applied to the perinæum, are the only external medicines, beſides thoſe juſt before mentioned, from which we may expect any relief. Internally, a courſe of mercurials, the pulſatilla nigricans, and the hemlock, have been recommended; but I have never ſeen any good effect from any of them.

CHAP.

CHAP. VI.

On the VENEREAL ISCHURY *and* STRICTURES.

A TOTAL ſuppreſſion of urine, occaſioned either by the remains of a former ſyphilitic complaint, or of a preſent venereal virus affecting the urethra, or neck of the bladder, we call a *Venereal Iſchury;* and a partial ſuppreſſion, or a difficulty of making water in a continued and natural ſtream, attended with pain, and a frequent deſire to make water, ariſing from the ſame cauſe, is commonly, though not always properly, called a *Stricture.*

WHEN I ſay, that the name *Stricture*, which has been given to the latter complaint, is often a very improper appellation, it is becauſe a partial ſuppreſſion of urine, as well as a total one, may ariſe from different cauſes; among which a ſtricture or conſtriction of one particular part of the urethra is only perhaps the moſt common one.

THE different cauſes by which either a partial or total venereal ſuppreſſion of urine is produced, are, *1ſt*, An inflammation or ſpaſmodic contraction of the neck of the bladder, from a recent retropulſed clap. *2dly*, A chronic conſtriction or narrowneſs of one particular part of the urethra, from a thickened and hardened portion of its ſubſtance, properly called a Stricture.

Stricture. 3*dly*, A compreſſion of the neck of the bladder or urethra, producing a partial or total abolition of its cavity, by a preternatural ſwelling of the proſtate or of any other gland of the urethra. 4*thly*, A prominent cicatrix of a preceding ulcer, or a fungous excreſence in ſome part of the urethra, commonly known by the name of *Caruncle*.

As upon the perfect knowledge of theſe cauſes the radical cure of the diſeaſe entirely depends, we ſhall conſider them more minutely.

WHENEVER the running of a clap is ſtopped by any cauſe whatever, the virus ſeems to go lower down the urethra, and to excite there a ſimilar irritation and inflammation, as it did in its former place. If it fixes its place at the caput gallinaginis, and there irritates the mouths of the excretory ducts of the ſeminal veſicles, it produces, as we have obſerved in the foregoing chapter, a ſwelling of the epididymis, or what is commonly called a *ſwelled teſticle*. If it goes ſtill lower down the urethra, and ſettles at the neck of the bladder, it will, in this circumſtance, not produce a ſwelled teſticle, but an irritation, ſpaſmodic contraction, or inflammation of the neck of the bladder, with a total or partial ſuppreſſion of urine. The poiſon in that caſe, if the complaint be properly treated, will produce no other diſeaſe than a ſuppreſſion of urine for a few days only: after which it will leave that place; and, on going more forwards into the urethra, bring on either a ſwelled teſticle, or, if it returns to the ſame place which it originally occupied, reproduce the running, with the common ſymp-

toms of a clap, and ſo by degrees go off at laſt, without leaving any bad ſymptom behind.

But this ſo much wiſhed-for circumſtance does not always happen. The poiſon lodged in the neck of the bladder will ſometimes produce, beſides a variety of very diſagreeable ſymptoms, an ulceration in that place, or in ſome other part of the urethra. Though the diſcharge ariſing from ſuch an ulcer be, by degrees, partly or entirely ſtopped, and the ulcer itſelf healed, we often obſerve either a coarctation of the urethra remaining at the place where the ulcer was, or the cicatrix of the ulcer forming a kind of knot or protuberance into the paſſage. Sometimes alſo the ulcers, on healing, will form large granulations, or preternatural excreſcences, which afterwards produce the ſame effect as a prominent cicatrix, under the name of *Caruncles* (which complaint, however, never occurred to me in practice); or the proſtate gland, or any of the glands of the urethra itſelf, form a fungous excreſcence, protruding into the urethra, or neck of the bladder, and thereby produce an anguſtation, or a total abolition of the cavity of the paſſage. Anatomical diſſections have alſo diſcovered to us lately, that two ulcers of the urethra in oppoſite directions, or a ſingle large one, will ſometimes, in ſome place, grow together by bands croſſing the cavity of the urethra; and whilſt the lower part of the ulceration remains open, and continues the diſcharge mentioned in the chapter on Gleets, the upper parts grown together diminiſh or aboliſh the cavity of the urethra and thereby prevent the free paſſage of the urine.

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In ſome of theſe caſes the patient, eſpecially by living ſober and quiet, is able to make water pretty freely, though he wants a long time for doing it. But, on committing the leaſt exceſs in eating and drinking, or by taking too much exerciſe, the diſeaſe grows evidently worſe, the urine is diſcharged in drops only, or in a ſmall and interrupted ſtream, exciting great pain, anxiety, and uneaſineſs; or the paſſage is ſtopped entirely, and thus endangers the life of the ſufferer. The urine, in theſe caſes, ſometimes, as I have ſeen, forces its way into the rectum, and is evacuated by the anus; or it produces in the urethra, behind the coarctation, a dilatation, eroſion, ſinuſes, or a fiſtula, through which it afterwards conſtantly diſcharges.

The further back in the urethra this diſeaſe has its ſeat, the more troubleſome, in general, is the cure, and the more danger awaits the patient. The more inveterate or complicated all theſe ſpecies of the diſorder are, the more difficult is their removal.—Thoſe ariſing from a callous or contracted ulcer of the urethra, are more eaſily cured than thoſe ariſing from a protuberant cicatrix or from caruncles. That kind of iſchury which owes its origin to a retropulſion of a recent clap, I have obſerved to be removed eaſier and ſooner than all others; that ariſing from a ſcirrhous proſtate is often, though not always, incurable; but for an iſchury ariſing from a fungous excreſcence of the proſtate, the art has no remedy.

Method of Treatment.

THE firſt thing, if we are called to a patient affected with a venereal ſuppreſſion of urine, is, to inquire, whether it ariſes from a retropulſion of a recent clap, or from old complaints within the urethra. Our chief aim, in both caſes, being to remove the iſchury, we ought to examine, whether the diſeaſe is ſtill merely local, or whether there is a general irritation of the ſyſtem. If the pulſe be quick and hard, bleeding is neceſſary. The quantity of blood to be taken is regulated by the ſtate of the pulſe and conſtitution of the patient. A man of a ſtrong habit, or of a plethoric conſtitution, will bear the loſs of a pound; whereas half that quantity taken, will operate ſufficiently, and have the ſame effect, upon a delicate and tender habit. It ought, however, to be obſerved, that, in ſuch caſes, the patient will reap more benefit from one copious bleeding, than from two or three ſmall ones ſucceſſively made one after the other.

THIS being done; or when the ſyſtem is not affected, the bladder, if much diſtended, ought to be evacuated, and the catheter applied for that purpoſe. Its application, however, in thoſe circumſtances, is often very difficult, and ſometimes utterly impoſſible. This is certainly frequently owing to the cauſe of the diſorder; but much depends upon the ſkilful management of the ſurgeon.

IN order to facilitate the introduction of the catheter,

ter, (after the patient has been bled, which, if neceſſary, ſhould always precede), I have experienced the following management to be uſeful. The catheter being anointed with ſweet oil, is to be introduced gently. As ſoon as we meet with any obſtacle, care ought to be taken not to force it, but to wait a little, and then try to puſh it on again gently; becauſe this obſtacle ſeems ſometimes to ariſe only from a momentaneous ſpaſm of the urethra, excited by the mechanical irritation of the catheter itſelf; which, if we diſcontinue puſhing, frequently will go off in a few minutes, and the catheter is then eaſily introduced further: whereas, if we go on puſhing, in that caſe, the ſpaſm grows more violent, and renders the introduction often utterly impoſſible. It is owing, probably, to this ſpaſm that we ſee ſometimes that one ſurgeon is able to introduce it, while another, though by no means of inferior ſkill and talents, had before tried it in vain. If the obſtacle be at the caput gallinaginis, or further back, we may very often remove it by introducing a finger in the anus, and thus aſſiſting the catheter. I have ſeen inſtances where the introduction of the catheter proved impoſſible as long as the patient was lying in bed; whereas it went in very readily on the patient's ſitting on the edge of the bedſtead, his feet hanging down. I have alſo obſerved where a large catheter was eaſily introduced, after a ſmaller one had been repeatedly tried without ſucceſs.

I HAVE been perhaps too full in enumerating all theſe circumſtances. But I am confident, that, by a careful attention to one or the other of theſe points, we

we may not only often ſpare our patients a great deal of pain, but, what is perhaps more material, prevent a lues taking place; which eaſily happens when, by a rude treatment, the urethra has been wounded. I certainly have experienced in myſelf the moſt evident ſymptoms of the lues in the maſs from ſuch a cauſe. I had an iſchury from a ſimple clap; the diſcharge of which was ſtopped by a bad treatment. The ſurgeon, who was otherwiſe a very ſkilful man, on introducing the catheter, found a great reſiſtance at the neck of the bladder, at the ſame time that I felt a great deal of pain. After trying it two or three times to get through, he at laſt puſhed a little harder, whereupon ſome drops of blood were diſcharged from the urethra, and the moment after, (the catheter having paſſed the obſtacle), an abundant flow of urine. I recovered in a few days from the iſchury; and a few weeks after, the clap which had returned was likewiſe cured: but, to my aſtoniſhment, a ſhort time after, I felt a ſwelling and violent pain in the ſternum; which was radically cured by a courſe of mercury.

If the coarctation of the urethra be ſo ſtrait as to refuſe, even under the juſt-mentioned precautions, any catheter whatſoever, an application of a *ſmall catgut* will ſometimes ſucceed, and prove highly beneficial.

If the danger is not ſo great, viz. the bladder not very much diſtended, conſequently the *immediate* diſcharge of urine not ſo preſſing, and the introduction of the catheter proves very difficult, ſome other means

to

to procure a diſcharge of urine ought to be tried; of which I have found the following the moſt efficacious and uſeful. A common glyſter, mixed with ſome honey or lenitive electuary, ſhould be adminiſtered, in order to evacuate the fæces, and thereby to prevent the conſtant ſtimulus which their accumulation is apt to excite. As ſoon as the fæces are evacuated, a glyſter of equal quantities of barley-water and linſeed oil, with a full doſe of the tinctura Thebaica, ſhould be adminiſtered, and occaſionally repeated. Every kind of medicine or food apt to go through the urinary paſſages, ſhould be carefully avoided; and, for the ſame reaſon, the patient ſhould not drink even more of barley-water, or of the ſolution of gum-arabic, than is neceſſary to quench his thirſt. He ſhould likewiſe, according to circumſtances, be put into a warm bath, tempered with milk or a decoction of bran, for half an hour or an hour, and the ſame be repeated four or five hours after; or, what I have found often very ſerviceable, he ſhould be ſet upon a perforated chair, and expoſe his private parts to the ſteam of hot water mixed with vinegar. If he be reſtleſs and feveriſh, bleeding will ſometimes be proper, and a full doſe of laudanum ſhould be adminiſtered to him in the evening. The judicious application of theſe remedies I have ſeen ſometimes anſwer in the moſt deſperate circumſtances.

I SAW once, in a ſuppreſſion of urine, where there was no catheter at hand, that a roaſted onion, applied to the perinæum, by the advice of an old woman, had the effect; ſo that two hours after the application the urine flowed plentifully: and, in another caſe, the life of an eminent phyſician in the army

army was ſaved by covering the glans penis with the freſh pellicle of an egg found between the ſhell and albumen. As ſoon as the pellicle, growing dry, began to contract, the urine began to flow plentifully; but, on appling it the ſecond time, two days after, when the ſuppreſſion of urine unexpectedly returned, it proved, as the perſon who recommended it foretold us, inefficacious, and the patient died. Perhaps the volatile liniment, or a bliſter, applied to the perinæum, would produce the ſame effect, with more certainty, and quicker, than the remedies did in the two caſes related.

If we have been ſo happy as to evacuate the bladder, either by the application of the catheter, or by ſuch other means as have been now mentioned, our next care will be, to prevent a freſh accumulation of urine, and to remove as ſoon as poſſible the cauſe of the ſuppreſſion. The firſt will be effected by continuing the ſame remedies, and eſpecially (as has been recommended by ſome writers,) by leaving the catheter within the urethra. This, however, none of the patients, whom I have hitherto treated, were able to comply with. They ſuffered ſo much from keeping the common catheters applied, whether made of ſilver or ſteel, flexible or inflexible, as made them conceive, that the pain which would ariſe from a repeated application of the catheter, or from a freſh accumulation of urine in the bladder, could not poſſibly be greater; and therefore withdrew the catheter, though they were very deſirous to have retained it if they had found it poſſible. To guard againſt this inconvenience, I could never find out a remedy,

till

till I tried the catheters invented by Mr. *Theden*, firſt ſurgeon in the army of the King of Pruſſia. They are made of a golden wire covered with a ſolution of caoutchouc (elaſtic reſin). Their application is not only, in many inſtances, eaſier than that of the common catheters, or of hollow bougies of any kind; but alſo, in all inſtances in which I tried them, I found the patients could keep them applied, after the urine was diſcharged, with much leſs inconvenience. They are therefore, in thoſe caſes, much preferable to any other. But if we have none of theſe catheters at hand, which muſt be the caſe as long as they are ſo difficult to be got, and ſo high in price *, we muſt liſten to the patient's ſufferings, withdraw the catheter as ſoon as it becomes too troubleſome, and have recourſe immediately to ſuch remedies as will tend to prevent the return of the ſuppreſſion.

To ſuch as are in poſſeſſion of any of thoſe elaſtic catheters, the following rules, to be obſerved in their application, may perhaps be acceptable.

The elaſtic catheter, after being anointed with ſweet oil, is introduced in the common manner.—The ſurgeon, as uſual, gently draws with one hand the urethra towards him, and holding the catheter with the fingers of the other, always at the diſtance of an inch or two from the glands, gradually introduces it; whilſt this is performing, the catheter generally enters the bladder, without any particular direction from the hand of the operator. If any re-

* Both theſe inconveniences are now remedied by the catheters made of the ſame ſubſtance by Mr. Bernard at Paris.

ſiſtance be found, the rules mentioned above are to be obſerved, to facilitate the introduction; but if the reſiſtance be at the neck of the bladder, there is nothing more to be done, than gently puſhing the inſtrument forward, at the ſame time turning it from the right to the left; for, by turning it in the oppoſite direction, the ſpiral windings of the gold wire of Mr. Theden's catheter would be ſeparated. If the ſurgeon finds the obſtacle greater, he ſhould, as I ſaid above, ſtop the introduction till the contraction or ſpaſm of the ſphincter veſicæ and the reſiſtance ceaſes, which happens for the moſt part in a very ſhort time, when he is enabled to go through the paſſage eaſily. This catheter is introduced, like a common one, according to circumſtances, with or without a probe. After remaining in the urethra for ſome time, on being extracted, it is generally very ſoft, and therefore unfit for being uſed again until it has been cleanſed and dried, and put for a little time in a cold place; which operation reſtores it to its former firm texture. The method of cleanſing it is, to waſh the outſide with water, and likewiſe the cavity with the ſame applied by rinſing. For cleanſing and drying its inſide, a long needle with a ſilk thread will be moſt fit. When about to be uſed, and found to be too ſtiff, it may be ſoftened by keeping it a little in the hand, dipping it in warm water, or holding it near the fire-ſide.

But if all our endeavours to introduce any catheter or catgut have proved unſucceſsful, and the danger of a rupture of the bladder, from its diſtention, be imminent, the urine muſt be at all events diſcharged,

ged. This ſhould, therefore, not be deferred too long; and may be done, according to the ſeat of the diſorder, either by an inciſion into the urethra behind the ſtricture or ſeat of the ſtoppage; or, if that ſeat be in the neck of the bladder, and the inciſion and introduction of the trocar in that place perhaps be found too difficult for the ſurgeon, the bladder may be ſafely tapped through the anus, as firſt propoſed by Mr. *Fleurant*, or an inciſion may be made above the ſymphiſis pubis, and the bladder be tapped in this place under the peritonæum; both which operations are neither difficult nor painful, and either of them becomes neceſſary to ſave the life of the patient.

THESE are the means generally uſeful to give relief to the patient, in all caſes of *iſchuria urethralis*.

BUT, to cure that diſorder radically, its cauſe, as I have ſaid above, ought to be removed; which is effected, according to the nature of the complaint, by different methods.

IF the iſchury proceeds from a recent repulſion of a venereal Blennorrhagia, the running or clap muſt be recalled. For this purpoſe, beſides the general remedies before mentioned, the ſteam of hot water, alone or mixed with vinegar, or the volatile liniment applied to the perinæum, I have ſeen and experienced beſides the inoculation of the clap, to be the moſt efficacious remedies to remove the venereal poiſon from the neck of the bladder, and bring on the running afreſh. I recommend the ſuſpenſion of the

teſticles during the application of the ſteam; becauſe I have ſeen inſtances where the poiſon, leaving the neck of the bladder, inſtead of returning to its original ſeat under the frænum, ſettled at the caput gallinaginis, and thereby produced a ſwelling of the teſticle; which I have never obſerved ſince I took the above precaution. In the mean time, the patient ſhould keep quietly in bed, and warm poultices ſhould be conſtantly applied to the genital parts, as the accumulation of fæces ſhould be carefully avoided by means of glyſters. Emetics are, occaſionally, as uſeful in this caſe as they are in ſwelled teſticles; and the internal uſe of opiates produces, in many inſtances, a ſpeedy effect. As ſoon as the venereal poiſon, on leaving the neck of the bladder, occupies again its original place, the running is reeſtabliſhed, and then to be cured as claps in general are; only, the patient ought to take the greateſt care to avoid all the cauſes which are apt to bring on a ſimilar retropulſion; becauſe we ſee daily, that ſuch a retropulſion, after having once taken place, is eaſily brought on a ſecond time, even on the ſlighteſt occaſions.

I MUST, moreover, obſerve, that in ſuch a caſe, after the iſchury is removed, I always found the internal uſe of mercury neceſſary for a radical cure; having ſeen ſeveral inſtances where the abſorption of the virus took place during the ſuppreſſion, and excited afterwards evident ſymptoms of its preſence in the maſs, though the local complaint of the genitals was perfectly cured.

If the ſuppreſſion ariſes from a chronic complaint of the urethra, ſuch as from a ſtricture accompanied with an ulcer, or an eroſion of the excretory ducts of the proſtate gland or ſeminal veſicles, this cauſe we muſt endeavour to remove according to the rules laid down under the articles *Gleets* and *Venereal Ulcers*.

If the ſtricture ariſes from a ſimple conſtriction of one particular place of the urethra, without any ulceration, our care muſt be to dilate this coarctation, which owes its origin either to an ulcer healed up, by which the whole circumference of the urethra in that place is leſſened; or to a prominent cicatrix or calloſity, occaſioned by a previous ulcer. This is moſt effectually obtained by a long continued uſe of bougies, beginning with ſmaller ones, and going on gradually until the patient be able to bear thoſe of the largeſt ſize. The bougie he is to keep applied in the beginning for a quarter or half an hour, and afterwards, if he can bear it, for ſeveral hours, morning and evening. If a bougie of elaſtic reſin be at hand, this precaution is hardly ever neceſſary, as they, growing ſoft and fleſh-like in the urethra, produce little or no uneaſineſs. But as this kind of coarctation or ſtricture is ſometimes ſo very ſmall that it does not even admit the ſmalleſt bougie, the application of a ſmall catgut is an excellent invention*. The catgut once introduced, and left for ſome time in the urethra,

* The uſefulneſs of this application has been much enforced and confirmed in practice by Mr. J. Foot. *See Critical Inquiry into the Treatment of the Diſeaſes of the Urethra*; where the author has given us, beſides, a number of uſeful remarks on thoſe complaints.

urethra, begins to ſwell, by which means the coarctated paſſage inſenſibly enlarges; ſo that ſometimes, on withdrawing it the firſt time, the patient is able to make water with unexpected eaſe; and the next time a larger may be eaſily introduced, and have the ſame good effect. If by theſe means we have by degrees dilated the urethra ſo far as to admit the largeſt catgut, a bougie may be introduced; the uſe of which is to be continued for ſeveral weeks or months, even after the patient is perfectly cured and able to make water in one large continued natural ſtream.

If the coarctation does not even admit of a catgut, and the ſeat of the diſorder is at a place which we can come at, an inciſion into the urethra behind the coarctation is, as I have ſaid above, moſt adviſable: by theſe means the urine will be diſcharged through the inciſion, whenever neceſſary, and the return of the ſuppreſſion thereby effectually prevented. We may afterwards eaſily dilate the wound, paſſing the knife through the coarctation; and then introduce a bougie; which the patient is to wear until the ſtricture be removed, the whole wound be healed up, and thus the complaint be radically cured. The ſame method will be alſo ſometimes neceſſary, if the urine accumulated behind the coarctation has forced its way either through the inteſtinum rectum (in which caſe the patient will void his urine with the fæces through the anus), or by a fiſtulous opening through the perinæum. But, in theſe caſes, it will be in general neceſſary to let him go through a courſe of mercurials before we proceed to the operation of the fiſtula; otherwiſe we ſhall find ourſelves very often diſappointed

appointed in curing this latter. If he ſhould not have ſtrength enough to undergo ſuch a courſe, as is frequently the caſe, he is to be prepared by proper diet and medicines. On performing this latter operation, an inciſion muſt likewiſe be made through the ſtricture, the original cauſe and ſeat of the diſorder; and the patient is to wear a bougie during the cure, and for ſome time afterwards.

If the iſchury ariſes from excreſences or caruncles, as they are commonly called, or from invincible coarctations, the inciſion of the urethra at the place where the ſeat of the diſorder lies, and the cutting out of thoſe extraneous bodies, has been propoſed; but I have never yet heard of any caſe where this operation had been performed.

In a ſcirrhoſity or hard ſwelling of the proſtate, or a fungous excreſcence of the ſame gland, all the remedies recommended above for reſolving ſuch a ſwelling ought to be tried; and if they fail, we ſhould rather endeavour to bring the gland to a ſuppuration by irritating applications, than to let a diſorder increaſe which ſo frequently proves fatal.

If a ſwelling of any of the ſmaller glands of the urethra ſhould be the cauſe of the iſchury, and the moſt powerful reſolvents ſhould prove ineffectual, it will be proper to adviſe the patient rather to have the extirpation of the tumour performed, than to live in the conſtant anxiety about the dreadful conſequences of this complaint.

CHAP.

CHAP. VII.

On VENEREAL ULCERS.

AN ulcer arising in any part of the body from a venereal cause is called a *venereal ulcer*; but, if on the genitals, it is more commonly called a *shanker*, from the French word *chancre*; a name adapted to express its corroding nature.

VENEREAL ulcers owe their origin either to a *primary* or to a *secondary infection*; viz. to the venereal virus either originally applied, or deposited from a tainted mass to the surface of the body. Both kinds may arise on any part of the body; but they appear more frequently upon parts which are covered with a very thin cuticle; such as the glans penis, the inside of the prepuce, the urethra; the labia pudendi, nymphæ; the lips, mouth, nipples, &c. Of venereal ulcers arising in any internal part of the body, we have not yet, as far as I know, any authentic observation.

THOUGH venereal ulcers, as I have just now observed, do generally and most frequently appear only on parts which are covered with a very thin cuticle, especially on the glans, prepuce, fauces, &c. yet we not unfrequently meet with cases where they affect parts covered with thicker cuticle; as the penis, scrotum,

ſcrotum, thighs, &c. There are likewiſe ſeveral inſtances where ſurgeons, performing operations, or perſons aſſiſting in the delivery of women, had the misfortune of being affected with venereal ulcers in their hands or arms. In all caſes of this laſt kind, the poiſon ſeemed to me univerſally to operate more powerfully than when originally applied to the parts covered with a thin cuticle, or when depoſited from a tainted maſs. I know now a midwife, who, having been infected in this manner ſeveral years ago, ſtill ſuffers from the diſeaſe; and we have another inſtance of an eminent male-practitioner in the ſame art, who, by delivering an infected woman, was affected with ulcers in his hand; and to this preſent time ſtill labours under the conſequences, though it is now three years ſince he received the infection.—I know a gentleman who, wounding his finger by accident with a penknife, and expoſing the ſame, without thinking or ſuſpecting any bad conſequence, the very ſame night got the infection; whereby the wound was changed in two days to a very bad venereal ulcer, accompanied with a painful and obſtinate ſwelling of the whole arm, together with a bubo under the arm-pit, and other ſymptoms of a general infection.

Though I have attended with the greateſt care to all caſes of this kind which fell under my obſervation, I could never diſcover, in the conſtitution of the patients, any particular cauſe of ſuch violent ſymptoms. In two inſtances, the patients before and afterwards had venereal ulcers in places covered with a thin cuticle, and the poiſon there produced

the common ſymptoms only. It ſeems therefore probable to me, that, in order to produce primary venereal ulcers upon a place covered with a thick cuticle, the virus muſt either be extremely acrid in its nature, or produce more violent effects on account of its being applied to a part which has no mucus to dilute the ſame, or to defend itſelf from its acrimony. At leaſt, we very ſeldom obſerve ſuch violent and obſtinate effects in primary venereal ulcers upon parts covered only with a thin cuticle, or in ſecondary ones ariſing upon any part of the ſurface of the body. This is owing moſt probably, in the former caſe, to the poiſon meeting with a quantity of mucus to dilute it, and in the latter, to its having been diluted, or having undergone ſome change by its previous mixture with the maſs.

VENEREAL ulcers, ariſing from a primary infection, are either *local* or *univerſal;* viz. the venereal virus having been applied to the part, and, by its ſtimulus, produced an irritation and ſubſequent eroſion, is confined ſtill to that part only; or it has been at the ſame time abſorbed into the maſs, and thereby infected the whole ſyſtem. This diſtinction is uſeful and neceſſary in practice; becauſe ulcers of the latter kind, like thoſe ariſing from a ſecondary infection, can never be radically cured without a courſe of mercury; whereas the former may be cured by ſimple local applications.

BUT here I muſt take notice of another material circumſtance and diſtinction, which is of the greateſt importance in practice, and to which writers on this ſubject

ſubject ſeem to have hitherto paid little or no attention. Ulcers ariſing on the genitals are now-a-days generally, ſometimes even after the ſlighteſt examination, pronounced to be venereal, and treated as ſuch; whereas it is matter of fact, confirmed by daily experience, that ulcers, both of the fauces and genitals, may, in our days, as well as in thoſe of *Celſus*, ariſe, and do actually ariſe, from acrimonies or miaſmata, which have nothing in common with the venereal virus. This is a point of the utmoſt conſequence in practice to the phyſician as well as to the patient. However, by not paying proper attention to it, I have not only ſeen many times the character of innocent perſons brought into queſtion, but patients reduced, by a prepoſterous treatment, to a moſt miſerable ſituation.

I HAVE further not unfrequently obſerved the moſt dreadful conſequences, when ulcers of the mouth and fauces, occaſioned by the uſe of mercury itſelf, eſpecially under a ſalivation, are miſtaken for venereal ones, or when ulcers of the genitals or other parts of the body are confounded with venereal ones, which, though at firſt really venereal, during a mercurial courſe aſſume a different appearance, and thus ſeem to have entirely changed their venereal nature. Inſtead of healing, to which point they ſeemed to approach, they now prove not only obſtinate, but yielding a thin ichorous diſcharge, grow worſe and worſe under the continuation of the ſame remedy, and ſpread further and further. To ſhow the importance of theſe diſtinctions more evidently, I ſhall ſubjoin an account of a few caſes relating to that ſub-

ject but elucidate this point more fully hereafter, under the head *On Venereal Complaints incurable by Mercury.*

A GENTLEMAN, twenty-one years of age, of a ſtrong plethoric conſtitution, conſulted me ſome time ago about a ſhanker, as he called it, on the glans penis, with which he had been afflicted theſe eight or nine months paſt. He had conſulted, at the time he got it firſt, an eminent ſurgeon at Dublin; who preſcribed a courſe of mercurials, which produced a ſlight ſalivation. But the ulcer not healing, mercurial fumigations were applied for ſome time to the part affected; by which the ulcer ſeemed to grow leſs, and had aſſumed a better appearance, but had not healed. He was therefore adviſed to a ſecond mercurial courſe, with a different preparation of mercury, internally as well as externally; but, under this courſe, the ulcer, inſtead of healing, grew from day to day larger, deeper, and in every reſpect, worſe. In that condition he came to London, and conſulted me. Upon examining the part affected, I found a large deep ulcer on the glans, with hard and prominent borders, extremely ſenſible to the leaſt touch. Its baſis appeared reddiſh and pretty clean; but the diſcharge ſeemed to be of an acrid corroſive nature; by which, indeed, half the glans was already conſumed. I told him that I had ſeen ſeveral ulcers of this kind before; that it was not of a venereal nature; and that mercury, according to my obſervation, was, in that kind of ulcers, the moſt unfit remedy; that I would undertake to cure him, but that the cure would require at leaſt two or three months time. Upon which

which he left me, promiſing he would call the next day and put himſelf under my care. He did not; and I heard no more of him till four months after, when he ſent for me. At the time I ſaw him firſt, his complexion had been lively and freſh; but was now of ſuch a ſickly and cachectic appearance, that I hardly knew him. His account was ſhortly as follows: That, having been diſſatisfied with my firſt opinion upon his caſe, and with the advice I gave him, he, at the deſire of a friend, had thought proper to conſult an eminent ſurgeon in town; who, after a cloſe examination, had pronounced his ulcer to be venereal, and had aſſured him that nothing but mercury could cure him; adding, that he had not taken enough of mercury, nor the preparation which was deemed the beſt in thoſe caſes; and that, far from two or three months being required for curing him, his preſcriptions would effect a radical cure in three or four weeks time: That, upon theſe aſſurances, he had immediately ſubmitted to this new mercurial courſe, which brought on a gentle ſalivation; but with ſo little effect, that though the ulcer ſeemed to grow remarkably better during the firſt three or four weeks, it afterwards, inſtead of healing, had corroded the reſt of the glans with part of the urethra. Whereupon another ſurgeon was called in conſultation, who adviſed the amputation of the part affected; but the former refuſing, and the latter not being willing, to perform it, he had reſolved to drop their advice altogether, and to hear mine once more. On examination, I found the remaining portion of the penis ſwelled to a monſtrous ſize, the prepuce forming a perfect phymoſis over the extremity, and the

the urine diſcharging through three or four different holes. I adviſed him therefore to have the prepuce ſlit up, in order to ſee the ſtate of the ulceration, and to clean the ulcer, or to apply ſuch medicines as ſhould be thought proper. Internally I preſcribed him ſome ſtrengthening medicines. He uſed theſe latter for eight or ten days; but the operation he put off from day to day; when he was adviſed by one of his friends to conſult another phyſician, who, by means of a decoction of hemlock and ginſeng root, promiſed to do ſomething more for him than hitherto had been done. This decoction he took for a ſhort time with very little effect, the corroſion creeping on further and further. At laſt another phyſician, an acquaintance of mine, was conſulted; who inſiſted upon the ſame ſtrengthening courſe of medicines which I had formerly preſcribed, recommending, at the ſame time, a nouriſhing diet, the enjoyment of country air, and bathing in the ſea; by which means this young man is now re-eſtabliſhed with the loſs of more than half of his penis; which, had he followed the advice I gave him when he firſt conſulted me, would have been without doubt wholly preſerved.

The following obſervations occur to me upon this caſe. I think it extremely improper to adminiſter a courſe of mercurials for a local venereal ulcer; which was the caſe with this gentleman when he firſt applied to the ſurgeon at Dublin. A ſecond courſe and ſalivation with mercurial fumigations were ſtill more improper. Adviſing him a third courſe of mercurials, after the two former were found uſeleſs, was not only very injudicious, but extremely hurtful; becauſe it

it rendered him for ever unable for propagation, to the great ſorrow of his family. The preſcription of ſtrengthening medicines, given to him by the laſt phyſician whom he conſulted, with a nouriſhing diet, country air, and ſee-bathing, was the moſt judicious, and the only one to ſave his life, which was at the time in the moſt imminent danger. And I am firmly perſuaded, that the patient, who was forced to follow this latter advice only by the ſenſe of his ſufferings, would never have experienced any of all his miſeries, had he followed my advice in the beginning.

I was conſulted in another caſe, where ulcers of the throat ariſing during a mercurial courſe, being taken for venereal ones, and treated accordingly, by the continued internal uſe of mercury, became ſo bad, that both the tonſils, together with the velum pendulum, were almoſt entirely conſumed, and the patient reduced to a moſt miſerable ſituation; when, only by leaving off the mercury, and by the adminiſtration of a quite different courſe of medicines, he recovered. And Mr. *Brambilla* gives us an account of a patient, who, under a courſe of mercury, being affected with ulcers of the fauces, which having been miſtaken by the ſurgeon for venereal ones, not only loſt his velum by the continued uſe of mercury, but had a caries maxillæ brought on, which proved fatal to him. The ſame author alſo obſerves, that inflammatory tumors, or ulcers growing gangrenous, are conſtantly rendered worſe by the internal or external uſe of mercury, though they had evidently been originally venereal. I myſelf have ſeen many

many inſtances, where patients affected with venereal ulcers, united with a ſcorbutic habit of body, by the imprudent uſe of mercury, were not only reduced to a moſt wretched condition, but even brought to death. Mr. *Fabre*, in the Supplement to his Obſervations on the Venereal Diſeaſe, relates likewiſe ſeveral caſes, where ulcers, though evidently ariſing from a venereal cauſe, by a long-continued uſe of internal and external mercurials, and repeated ſalivations, were not only not cured, but brought to a ſtate, which afterwards yielding to no other medicines whatever, proved fatal to the patient. Whence, I think, it will appear to be of the utmoſt conſequence in practice, that we ſhould beſtow the greateſt attention in diſtinguiſhing,

1*ſt*, *Local venereal ulcers from univerſal ones*; viz. from thoſe united with, or ariſing from, a tainted maſs.

2*dly*, *Simple univerſal venereal ulcers from complicated ones*; viz. ſuch as are combined with ſymptoms of ſcorbutus, ſcrophula, &c.

3*dly*, *Ulcers of the genitals, mouth, fauces, &c.* reſembling venereal ones, but ariſing originally from other cauſes: For example, brought on by the acrimony of the ſaliva during the internal uſe of mercurials or mercurial fumigations, from real venereal ones. And, principally,

4*thly*, *Ulcers of the mouth, noſe, genitals, groins, &c.* which, though ſeemingly or evidently brought on originally by a venereal cauſe, have now, as it were, changed their nature, at leaſt ſo far, that mercury has

has no further any good effect upon them, but rather the contrary.

The characters by which thoſe different kinds of ulcers may be diſtinguiſhed are not eaſily deſcribed; a careful inquiry into the hiſtory of the diſeaſe, inſpection, and practical knowledge, are to be our beſt guides. An attention to the following points, however, may aſſiſt us in forming a proper judgment.

Venereal ulcers are, in general, pretty eaſily diſtinguiſhed by their hard margin or borders, by the lardaceous cruſt which their baſis is covered with, and by the preternatural redneſs of the ſkin all round the ulceration; which will be rendered more probable, if the patient is conſcious that he has previouſly expoſed himſelf to the infection. As there may, however, ariſe ulcers in the genitals, of a different, or ſometimes perhaps of a nearly ſimilar appearance, from other cauſes, as has been long ago taken notice of by ſeveral of the moſt ancient medical writers, and confirmed in many inſtances by my own obſervation, we ſhould be extremely cautious, and never form a raſh judgment about the nature of ſuch ulcers, nor pronounce them to be venereal, before we are perfectly ſure of it. By following a contrary method, we may not only hurt the reputation of an honeſt perſon, and diſturb friendſhip, and ſometimes matrimonial happineſs, as I formerly mentioned with reſpect to Blennorrhagias; but do material harm to the patient, by adminiſtering improper medicines. Ulcers which are not of a venereal nature, may be diſtinguiſhed from venereal ones,

1*ſt*, By their different appearance.

2*dly*, By their either ariſing only, or growing worſe, during the uſe of mercury.

3*dly*, By their having been unſucceſsfully treated with mercury before.

4*thly*, By their exquiſite ſenſibility.

5*thly*, By the relaxed ſtate of the whole body, or, by the flabby relaxed appearance, with an ichorous diſcharge from the affected part.

6*thly*, By ſymptoms of other diſorders, either alone, or accompanied with venereal ones.

Method of Cure.

It has been the opinion of ſeveral eminent medical writers, to treat all real venereal ulcers or ſhankers in the ſame manner, viz. by internal mercurials only; and never to make uſe of any external application. Several ſpecious reaſons have been alledged for ſuch a treatment; which, however, ſeem to me nowiſe ſatisfactory. It is ſaid, that ſhankers are ſigns of the preſence of the venereal poiſon in the body; and if, therefore, they diſappear by the ſimple internal uſe of mercury, we are ſure that the medicine has penetrated into the maſs, and that the poiſon is thereby totally eradicated. To this I anſwer, That recent venereal ulcers, brought on by an original infection, are by no means ſuch ſymptoms as has been aſſerted. On the contrary, they are in that caſe only a local diſeaſe, which requires no internal, but merely local remedies; and if no topical application is made uſe of in time, they very often

ſpread amazingly, the poiſon is abſorbed, and produces either buboes or other venereal ſymptoms in the maſs. I undoubtedly allow, that if venereal ulcers are of ſome ſtanding, the maſs will then be in conſequence infected; in which caſe, as well as when they ariſe from a ſecondary or univerſal infection, they are certainly what has been aſſerted of them, unequivocal ſigns of the preſence of the poiſon in the maſs. Then, indeed, I perfectly coincide with the opinion, that they may be treated only by the internal uſe of mercury, without any external application; becauſe, if they diſappear by the internal uſe of mercury alone, without having applied any external remedy, we are ſure that we have eradicated the poiſon from the maſs, and cut off the evil by the root. But even in this caſe, if they affect the genitals or the extremities, the poiſon is often apt to excite a violent inflammation, phymoſis, mortification, &c. or it is abſorbed and carried to the lymphatic glands, where it occaſions buboes, before the mercury has had time to produce its effects, and to deſtroy the poiſon on the part affected.

These are the reaſons why I always chooſe to apply immediately to all venereal ulcers the moſt effectual remedies for removing them; becauſe I think there is nobody acquainted with the nature of this diſorder, who would not prefer being affected with a real pox to a mortification of the penis, or to a bubo. As to what has been ſaid and obſerved by ſome, that a bubo very often appears after ſhankers have been healed up by external applications, and that conſequently thoſe very remedies which are recom-

mended to avoid buboes, not unfrequently bring them on, I readily admit the fact; but I am very far from believing the conſequence drawn from it, viz. that external remedies applied to a venereal ulcer, ever promote the abſorption of the virus. It happens, in that caſe, what we ſee happen every day, without any external application whatever, or what we muſt daily be afraid of, as long as there is the leaſt appearance of a venereal ulcer. What they aſcribe in that caſe to the medicines externally applied, I would rather aſcribe to their application being too long delayed, or to their not being ſufficiently efficacious. In all caſes, therefore, where I have reaſon to apprehend any bad effects, I think it not only proper, but neceſſary, to apply to all venereal ulcers, whether of a primary or ſecondary infection, the moſt efficacious local remedies, in order to remove them as ſpeedily as poſſible; with this difference only, that I conſider ulcers ariſing from a recent original infection as merely local, and think they may be ſafely cured by topical applications alone, without the internal uſe of mercury; whereas thoſe ariſing from a tainted maſs, require always, at the ſame time, a courſe of mercury. This laſt method I likewiſe think neceſſary in venereal ulcers of ſome days ſtanding, though ariſing from an original infection; there being always the greateſt probability that ſome of the poiſon has been abſorbed into the maſs during that time. External applications alone will never have any permanent effect in thoſe caſes, becauſe, if we are even able to deſtroy the poiſon in the affected part, and to conſolidate the ulcer, it will ſoon break out again on the ſame or

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ſome other part of the body as long as there remains the leaſt particle of it ſubſiſting in the maſs.

THE beſt remedy, as well for preventing as for curing recent ſhankers, I find, after repeated trials, to be ſpirit of wine, rum, and, ſtill better, Hungary water, or lavender ſpirit*.

THE other external remedies recommended for curing venereal ulcers, are, *Cauſtics*, *Mercurials*, and *Aſtringents*.

THE application of cauſtics have been of late warmly recommended in recent venereal ulcers, ſo as to touch them once every twelve or twenty-four hours with the lapis infernalis, till ſloughs falling off ſucceſſively, the baſis of the ulcer becomes red and pure. This practice is undoubtedly ſometimes proper; but there are conſtitutions which will not bear any acrid application whatſoever, eſpecially that of cauſtics. I have ſeen inſtances where, in ſuch irritable or in ſcorbutic conſtitutions, very bad ſymptoms followed; and, in one caſe, a mortification of the part was the conſequence of ſuch an application. In theſe ſubjects, the internal uſe of Peruvian bark, with external aſtringents, or occaſionally a mercurial lotion, will be more ſerviceable.

AMONG the mercurials, the red precipitate ſprinkled upon them every morning and evening, anſwers very

* The uſe of this efficacious remedy was firſt communicated to me by Dr. Nooth, phyſician in London; the ſame who is the inventor of the ingenious apparatus now generally in uſe for impregnating water with aërial acid.

very well, as long as the ulcer is covered with the white lardaceous cruſt. The mercurial ointment in this caſe is of little or no uſe; but whenever the bottom of the ulcer aſſumes a cleaner appearance, then the ſimple mercurial ointment, or calomel in powder, or ſuſpended in lime-water, or, according to circumſtances, the ſublimate with lime-water, or a diluted ſolution of mercury in nitrous acid, are ſerviceable. In caſes more obſtinate, the fumigations with cinnaber prove ſometimes very efficacious.

If the mercurial applications produce no effect, or are judged to be improper, the external uſe of aſtringents anſwers often extremely well; ſuch as a decoction of the tormentilla root, or of the Peruvian bark, or an infuſion of the latter in lime-water.—In other caſes, the aqua vitriolica camphorata, a ſolution of blue vitriol, or the viride æris diſſolved in oil, will be more uſeful. The ſame aſtringents will alſo ſometimes anſwer our expectations in ulcers of an atonic or relaxed appearance, yielding an acrid ichorous diſcharge.

Against obſtinate venereal ulcers, opium has been lately found very uſeful, given internally, beginning with one grain, and thus daily increaſing with a grain till the patient takes at laſt fifteen grains. It deſerves to be remarked, that opium, in thoſe large doſes, never produces coſtiveneſs. This method was firſt diſcovered and recommended by Dr. *Nooth*, at the time firſt phyſician and inſpector of all the military hoſpitals of the army in America, and has ſince been publiſhed without mentioning his name.

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If venereal ulcers reſiſt the means juſt now recommended, the internal and external uſe of ſtrengthening medicines, a full diet, the uſe of wine, country air, and ſea-bathing, as mentioned above, will often prove effectual when all other remedies have failed. Of other medicines recommended for inveterate venereal ulcers, I ſhall ſpeak hereafter, under the article of *Venereal Complaints incurable by Mercury.*

I have ſaid nothing about the venereal ulcers of the noſe, eyes, face, &c. becauſe they require the ſame treatment as thoſe of the genitals, and may be eaſily avoided, by taking care that the patient affected with a clap or ſhanker on the genitals, after having touched the part affected, always carefully cleanſes his fingers.

Ulcers of the uterus or vagina, accompanied with an acrid ichorous diſcharge, are not always, as is generally imagined, cancerous, but not unfrequently venereal; and may then often be cured by proper injections and a courſe of mercury. I have ſeen ſeveral women, who thought themſelves, from the pain and ichorous diſcharge tinged with blood, affected with a cancer of the uterus (believing in that point the judgment of their attendants), radically cured by the internal uſe of powerful, ſtrengthening, and abſorbent medicines, and by injections made of a ſolution of ſublimate or calomel in lime-water, alone, or mixed with the tincture of maſtic; or, according to circumſtances, with the infuſion of Peruvian bark in lime-water.

But we ſhall find ourſelves much miſtaken if we expect any good effect in this caſe, as well as in the fluor albus or menorrhagia, from injections, as they are commonly uſed. If we wiſh to ſee any effect from them, they muſt be applied to the part affected; and therefore not thrown in the common manner into the vagina, in expectation that they will, of themſelves, by theſe means, reach the ſeat of the diſorder, or the cavity of the uterus. A proper ſyringe of a particular form and ſize, calculated to prevent the matter injected from eſcaping and running out at the ſides, muſt be introduced, and, in ſome caſes, as high as poſſible into the vagina, or, if poſſible, into the orifice of the uterus itſelf; the patient lying a little declined, and her knees bent: and in this ſituation the injection is to be applied, either by herſelf or by an aſſiſtant, three or four times ſucceſſively, keeping the ſyringe always in for ſome minutes, and repeating the ſame operation ſix or eight times a-day.—— A ſyringe made of a bottle of elaſtic reſin, with a thicker and longer pipe than common, will anſwer for the above purpoſe extremely well, and will effectually remove the prejudices hitherto ſo juſtly entertained of the inefficacy of injections in females.

For *cancerous ulcers* of the genitals as well as of other parts of the body, the Materia Medica has, to my knowledge, if we perhaps except cauſtics, nothing to afford; and all the medicines hitherto recommended for curing cancers, appear to be deceptions of the inventors themſelves or of the public. Surgery alone can radically cure cancers, if applied in time; and no honeſt phyſician will ever recommend uncertain

uncertain remedies, leſt, by temporizing, he ſhould for ever loſe the moment where he could have applied a certain one; I mean the extirpation not too late deferred where it can take place.

On Venereal Fistulas.

In treating of venereal ulcers, we muſt ſay a word about venereal fiſtulas, which are nothing but venereal ulcers penetrating deep into the cellular membrane and adjacent parts, with a ſmall callous orifice, and callous inſide. Their ſeat is moſtly in the urethra, groins, perinæum, anus, &c. but ſometimes alſo in the lachrymal ſac of the eye.

If there be an abſceſs formed in the perinæum, this, like other abſceſſes in thoſe parts, ſhould be very ſoon opened, in order to avoid fiſtulas, &c. Pus is ſoon formed in thoſe parts; and the application of an emollient poultice for a few hours, will often readily ſoften the preceding hardneſs, and render it fit for opening.

Besides the internal adminiſtration of mercury, the injections above recommended ought to be tried; if they do not ſucceed, the chirurgical operation ought to be performed. We ſhould, however, never attempt this latter before we have carefully eradicated the venereal virus from the tainted maſs. From the neglect of this point, we ſee daily, that ſuch patients undergo two or three times the operation, without being the better for it: the fiſtula remains as obſtinate as it was before; or, healing in one place, it

ſoon breaks out in another. If the fiſtula heals quick and perfectly after the operation, it is a certain ſign that the patient has been radically cured of the lues.

The fiſtula lachrymalis, ariſing from the venereal virus lodged in the lachrymal ſac, yields very often a yellow-greeniſh diſcharge, reſembling that oozing out of the urethra in a clap. Whether it ever ariſes from a ſuppreſſed or retropulſed clap, I cannot poſitively ſay; but it owes its origin frequently to the venereal poiſon depoſited from a tainted maſs, and requires internal and external mercurials.

The virus oozing out from venereal ulcers and fiſtulas, is ſometimes of a very corroſive nature; they ſhould therefore be dreſſed with a piece of ſoft ſponge every twelve or twenty-four hours; and the ſurrounding ſurface of the ſkin ſhould be carefully defended, by anointing it with the white cerate, or ſaturnine liniment.

CHAP.

CHAP. VIII.

Of the PHYMOSIS.

THIS diſeaſe, in which the prepuce is ſo ſwelled and ſtraitened that it cannot be drawn back over the glans, has been called *Phymoſis*, from the Greek φιμοω, *præcludo*, *obturo*; and might perhaps in our language be more properly called a *coarctation* or *ſtricture of the prepuce*.

To this diſorder are eſpecially ſubject thoſe men who, from nature, have the glans covered with a more ſtrait prepuce, or have too ſhort or too ſtrait a frænum; all thoſe whoſe religion orders circumciſion are free from it.

THE phymoſis ariſes, in our days, generally from venereal ulcers in the inſide of the prepuce, or from the Blennorrhagia balani (a clap of the glans,) commonly called *gonorrhœa ſpuria*, producing a violent ſwelling and inflammation of the prepuce and diſcharge from the glans.

IT has been recommended, in a violent phymoſis, to ſlit up the prepuce; which is certainly ſometimes neceſſary: But where chirurgical operations can be avoided, we ought to avoid them. This operation has been adviſed principally either to prevent the

ſpreading of ſhankers, which are frequently the cauſe of the phymoſis; or to avoid buboes; or, what is ſtill more material, to prevent a concretion of the glans with the prepuce. Thoſe who, in curing ſhankers, truſt entirely to the internal uſe of mercurials, will hardly inſiſt upon this operation. As to the danger of their producing buboes by an abſorption of the poiſon, I allow the apprehenſion to be perfectly juſt; but I cannot admit that an inciſion would prove a preventative. A freſh wound, by expoſing a new and larger ſurface to the abſorption of the virus, muſt, in my opinion, rather increaſe the danger. I think it, therefore, more proper to obviate thoſe bad conſequences by proper injections, and by introducing, if poſſible, ſome fine lint once or twice a-day with a probe between the prepuce and glans. However, if this ſhould be impracticable, or livid ſpots ſhould appear through the prepuce, immediate recourſe to the operation ought to be had, leſt a more dreadful evil, a mortification, ſhould enſue.

Venereal ulcers, with a phymoſis, corrode very often the glans, the urethra, and corpus cavernoſum of the penis; and thus produce now and then a violent hæmorrhagy, which requires proper injections, or the application of the lapis infernalis. If the hæmorrhagy ariſes from an eroſion of the veſſels, or their want of power to contract themſelves, ſtyptics, or oil of turpentine; if, from too great an irritability of the veſſels, a ſolution of opium in water ſhould be injected. The formation of pus which is confined, renders the inciſion neceſſary.

In order to aſcertain whether there is a venereal ulcer between the prepuce and glans, I introduce a probe, with ſome lint affixed to it. Then, turning it round the whole glans, the patient generally feels pain, if there be any ulcer, as ſoon as the probe with the lint touches it; and upon withdrawing it, a part of it will be ſtained with purulent or puriform matter; whereas, if there is but a ſimple diſcharge from the glans without any ulceration, the whole of the lint will be ſtained with the ſame equally. In either caſe, if the inflammation and ſwelling be violent, leeches, or, according to circumſtances, a poultice made of bread and water, mixed with ſome vinegar of lead, ought to be applied to the part affected, and three or four times a-day a diluted ſolution of mercury in nitrous acid, or the ſublimate or calomel ſuſpended in lime-water; or, according to circumſtances, Plenck's ſolution of mercury with gum-arabic, between the prepuce and glans, ſhould be injected in ſuch a manner, that the interſtice between them is filled and a little diſtended with the injection. If there be any ulcer, ſome lint dipped in the ſame liquids may be applied to it, by means of a probe, once or twice a-day. Mercurial fumigations are in this caſe often uſeful. I think there is never any danger of a concretion of the parts as long as the ulcers remain venereal; and meanwhile their nature is changed, the phymoſis is alſo generally removed. A courſe of mercury ought in ſuch caſes never to be omitted. But, as I have obſerved before, the inciſion of the prepuce ought to be immediately performed, if the ſymptoms of the inflammation be very high; if there appear any danger of mortification;

or,

or, if we have reaſon to ſuſpect, beneath, an ulceration of a bad or perhaps cancerous nature.

In phymoſis, we ſee the prepuce often increaſe to an enormous ſize, forming rugged condylomatous excreſcences. This, I have obſerved, has miſled practitioners to propoſe, or actually to perform, the amputation of the penis, in the idea of being cancerous. I have cured ſeveral of theſe caſes, and therefore think it highly imprudent hardly ever to propoſe or perform that operation; eſpecially as thoſe ſwellings frequently diſappear in a few weeks time, under a mercurial courſe and proper external applications.

CHAP.

CHAP. IX.

Of the PARAPHYMOSIS.

PARAPHYMOSIS, a word derived from the Greek παρα *de*, and φιμὸς *præcluſio*, *obturamentum*, ſignifying the oppoſite of phymoſis, is a diſeaſe where the prepuce, being drawn behind the glans, is ſo contracted there, that it cannot be brought again forwards over the glans; and would, for this reaſon, in my opinion, be more properly named a *ſtrangulation of the glans*.

MEN who from nature have a ſtrait prepuce are moſt ſubject to this diſorder; which ariſes when the prepuce has been drawn back at a time when the ſize of the glans, either from venereal ulcers, or in a violent clap, is preternaturally enlarged.

I HAVE little to add to what has been ſaid on this ſubject by Celſus, and ſome modern writers.

IT is a dangerous complaint, and requires the moſt ſpeedy relief, I have ſeen an inſtance where a gangrene of the glans was the conſequence of ſuch a ſtrangulation, before the ſurgeon could come to give aſſiſtance. We ought therefore, without delay, apply thoſe means which may bring the prepuce forwards as quick as poſſible.

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The moſt effectual remedy is, to apply to the ſwelled glans the aqua plumbata (commonly called *Goulard's water*), carefully avoiding to touch the prepuce with the ſame; by which means the glans is ſo powerfully contracted, that the prepuce may be generally pretty eaſily brought over it forwards, and thus the complaint is effectually removed. Or if this ſolution be not at hand, cold water may be ſprinkled repeatedly upon the part, in the mean time gently preſſing the ſwelled glans with the fingers dipped repeatedly in cold water, ſo as to ſqueeze out, if poſſible, all the blood extravaſated in its cavernous ſubſtance. By theſe means, the turgeſcency of the corpus cavernoſum glandis will be moſt efficaciouſly diminiſhed; and by ſkilful management, gently preſſing the glans backwards, whilſt we endeavour with the fingers of the other hand to bring the prepuce over it forwards, we ſhall very often ſucceed, and relieve the patient from imminent danger. Ice, or water rendered by art as cold as ice, may perhaps be uſeful to the operator in accompliſhing this deſirable effect. But if the diſeaſe be accompained with a clap, we ought to be cautious with regard to the application of cold, leſt we might bring on a worſe complaint, by retropulſion, than the diſeaſe for which cold is applied. If we ſhould not be able to reduce it, and the ſymptoms be violent, we ſhould not defer the operation, but make an inciſion in the prepuce or frænum; an operation by no means dangerous, but abſolutely neceſſary to prevent the moſt diſagreeable of all conſequences of venereal complaints, a mortification of the glans penis. If there are venereal ulcers in one ſide, I prefer always to make the inciſion

incision of the frænum or prepuce on the other side; in order to secure the wound, as well as possible, from the poison, and to prevent its absorption by the lymphatics of the fresh wound.

CHAP. X.

On VENEREAL BUBOES.

A SWELLING of any of the lymphatic glands of the body is called a *Bubo*; and if ſuch a ſwelling be occaſioned by the venereal poiſon, we then call it a *Venereal Bubo*. The latter only comes within the plan of this treatiſe.

THOUGH buboes may ariſe in any part of the body where lymphatic glands are ſituated, yet we have no authentic obſervation of their ever exiſting any where except in the lymphatic glands of the groin; arm-pit, or extremities; and even of theſe, the latter are much leſs frequent than the former.

VENEREAL buboes ariſe from two cauſes, eſſentially different from one another. This difference has hitherto, in general, not been attended to with that accuracy which the importance of the ſubject ſeems to require.

BUBOES have hitherto been ſuppoſed to ariſe always from the venereal virus abſorbed by the lymphatics, and carried to the gland; but this is not always the caſe. Swellings of one or more of the inguinal glands frequently owe their origin to the poiſon lodged on the ſurface of the glans or urethra, irritating

ritating there the mouths of the lymphatics, without being abſorbed by them. Theſe veſſels being irritated, produce a ſwelling in the neareſt lymphatic gland they go to. In the one caſe, the cauſe of the bubo lies in the gland itſelf, in the other without it; ſo that we may properly diſtinguiſh them, by calling the former an *idiopathic*, and the latter a *ſympathic* bubo.

This diſtinction, founded on facts, is neceſſary to regulate the method of cure. But the diſtinction of buboes into *primary* and *ſecondary*, viz. ſuch as ariſe from an original infection, and thoſe which are ſuppoſed to owe their origin to the poiſon depoſited from the maſs into the gland, ſeems to be of no practical uſe whatever.

Idiopathic venereal buboes, as we have obſerved, owe their origin to the venereal poiſon abſorbed and lodged in the gland. This abſorption frequently takes place after the virus has by its acrimony produced ſome ſlight excoriation or ulceration in the ſurface of the glans, prepuce, urethra, penis, ſcrotum; or extremities. Whether a bubo ever ariſes, as has been hitherto generally aſſerted, from the venereal virus being depoſited from the maſs into the gland, as peſtilential buboes ſeem to ariſe in the plague, is not yet perfectly aſcertained. But that buboes may ſometimes, though ſeldom, ariſe from an immediate abſorption of the venereal virus, without any previous excoriation or ulcer on the ſurface of the genitals or neighbouring parts, ſeems to me highly probable from ſeveral authentic obſervations;

though this opinion has been controverted by ſome modern writers.—About twelve years ago, three ſoldiers came into a military hoſpital in one week, all affected with a bubo from the ſame woman. They had been all in perfect health a few days before; neither had any of them, on being carefully examined, any appearance of a clap, or the leaſt excoriation in the genitals or thighs. Whether this immediate abſorption is owing to a torpid and leſs irritable habit of body, or to the greater ſubtilty or leſs irritating nature of the venereal virus in ſome caſes, I cannot pretend to aſcertain. But to this immediate abſorption it is perhaps owing, that we are not always able to avoid a bubo, or perhaps even the lues itſelf; though by uſing preventatives, we may moſt effectually prevent claps and original ſhankers.

That idiopathic buboes ariſe from an abſorption of the venereal poiſon from ulcers of the genitals or urethra, daily experience ſhows; but that they likewiſe ariſe from venereal ulcers in any part of the upper or lower extremities, is not ſo general. I ſhall therefore adduce a few examples by way of illuſtration.

Some years ago, I had the misfortune of being affected with a ſhanker. Being then on a journey, I took ſome mercurial pills; by the uſe of which the ulcer was cured in about ten days. I then diſcontinued the pills, and felt no complaint till ſix months after, when I was one night awaked by a violent itching at my right elbow. Next night the itching returned; and the third morning, upon examining the

the ſpot, I found it covered with a thick yellow ſcurf like a tetter. As I had no medicines with me, I was obliged to defer applying ſome medicine; when, two days after, I perceived a ſwelling under my arm-pit; which, in three days more, increaſed to ſuch a degree, that I was obliged to keep the arm a conſiderable way out from my ſide. By the application of the mercurial ointment to the tetter twice every four-and-twenty hours, the tumour was in a few days diſcuſſed, and the diſeaſe, by a courſe of mercury, perfectly cured ſome weeks after.

A SHORT time after, I was conſulted by a gentleman who had undergone a mercurial courſe about fifteen months before, for a venereal complaint, of which he imagined himſelf perfectly cured. Some weeks before he applied to me, he began to feel a pain in the middle of the ſternum, which he took to be rheumatic. On this ſuppoſition, he rubbed the part affected with a piece of flannel, morning and evening. Thus the pain in the ſternum was removed; but, the ſecond morning after, the greet toe of the left foot, and that next to it, were in like manner affected. This pain being removed by friction with flannel as before, returned to the ſternum; from which being driven by a ſimilar friction, it again returned to the foot. He now began to imagine, that his complaint was of a gouty nature; but having occaſion to go abroad that day, he bathed his foot in warm water, and pared a corn which he had upon one of the affected toes, in order to walk the more eaſily. In performing this operation, by cutting too deep he wounded himſelf. The next

day,

day, on examining the part, he found a little ſuppuration had taken place; he therefore covered the ſore with a piece of clean linen. The ſecond evening he felt a ſlight pain in the groin, which he then diſregarded; but, in a few days after, when one of the glands ſwelled to the bigneſs of a pigeon's egg, he aſked my advice. I informed him, that he had not been radically cured of his former diſorder, and that the preſent ſymptoms were a conſequence of it; that the pain both of the ſternum and of the toes had been venereal; and that from the wound of the toe, and ſucceeding ſuppuration, the poiſon had been abſorbed by the lymphatics, and carried to the firſt gland they met; which in this caſe was one of the lower lymphatic glands of the groin. The ulcer of the toe ſtill continued, but was very ſmall, and diſcharged a little matter reſembling pus. I applied a mercurial plaſter upon it, and diſcuſſed the bubo by a courſe of mercurial frictions applied to the thigh.

Some years ago, an eminent accoucheur in London, as I mentioned in the firſt chapter, was called to deliver a woman, who, unknown to him, was affected with ſhankers. Ulcers on his hand, and a ſwelling of the lymphatic gland of the fore-arm, which proved very obſtinate, were the dreadful conſequences.

Sympathic venereal buboes, as I have already mentioned, owe their origin, not to the venereal poiſon abſorbed, but to an irritation of the mouths of the neighbouring lymphatic veſſels. This ſpecies of bubo we frequently meet with in ſimple venereal Blennorrhagias;

Blennorrhagias; or, where one of the glands is idiopathically affected, we ſometimes ſee two or three contiguous thereto ſwelled by ſympathy. In this caſe, however, only that which is really infected continues to increaſe in bulk; while the others remain in the ſame ſtate, and at laſt diſappear without any further conſequences.

Sympathic buboes go off ſpontaneouſly, as ſoon as the irritating cauſe in the neighbourhood is removed; and it is only this kind of buboes which quacks, with their pretended noſtrums, ſeem to remove ſometimes in a few days; while, on the other hand, we frequently hear patients complaining of intelligent phyſicians, for not having been ſufficiently expeditious in curing their bubo, or not having done it without ſuppuration, though they had formerly been radically cured by a quack, by the ſimple application of a mercurial ointment or plaſter to the part affected. If ſuch patients, however, were acquainted with the difference between the true nature of their preſent and former complaint, they would eaſily ſee, that, in the former caſe, the cure was not to be attributed to the ointment or plaſter applied, but merely to the nature of the diſeaſe; whereas, in the preſent ſituation, perhaps great ſkill and attention is requiſite, either to diſcuſs the bubo, or to cure it, after the attempt of diſcuſſing it has proved ineffectual.

Having thus eſtabliſhed the eſſential diſtinction betwixt Idiopathic and Sympathic buboes, I ſhould now proceed to ſpeak of the method of treating them; but,

but, previous to this, it will be uſeful to take notice of ſome prejudices prevailing among a number of patients, concerning the nature and cure of this complaint.

MANY people, eſpecially the inhabitants of the more ſoutherly parts of Europe, think it dangerous to reſolve or diſcuſs a venereal bubo. This prejudice ariſes from an opinion, that the virus is by this means repelled and abſorbed into the maſs, where it afterwards occaſions a general infection: whereas, if the bubo were cured by ſuppuration, they imagine that no infection of the maſs was to be apprehended; but that, on the contrary, even in caſe any poiſon ſhould have been abſorbed during the ſuppuration of the bubo, the virus lodged in the gland would thus not only be carried off, but the whole maſs would thereby be purified. Hence they imagine, that the abſceſs formed by the ſuppuration of a bubo, is a kind of channel for cleanſing the body entirely from all the venereal poiſon. As this opinion, however, is not only altogether erroneous, but may prove hurtful to the patient, at leaſt by depriving him of an advantage which he might otherwiſe have enjoyed, I ſhall make two obſervations on this ſubject. *Firſt*, That, by the modern improved practice of applying mercurial frictions, the diſcuſſion of a bubo cannot poſſibly occaſion any ſuch thing as a repulſion of the venereal virus into the maſs; that, on the contrary, the virus lodged in the gland itſelf is thereby effectually deſtroyed. And, *ſecondly*, That though the virus ſhould have been actually repelled from the gland into the maſs, ſuch a repulſion would ſtill be preferable

preferable to the method of curing the bubo by ſuppuration.

But in order to ſet this matter in the cleareſt light, I muſt have recourſe to the anatomical diſcoveries which have been made about the lymphatic ſyſtem; and I ſhall then conſider what will be the conſequence of mercurial frictions applied in the manner to be mentioned hereafter.

We know, from the obſervations of Profeſſor Monro, and thoſe of the late Dr. W. Hunter, and particularly from Mr. Hewſon's plates*, that the lymphatic or abſorbent veſſels begin every where on the ſurface of the body, with the ſmalleſt ramifications; that, in going upwards from the lower extremities, they unite into larger branches, which terminate in the inguinal glands, pouring into them the liquid which they have abſorbed at their extremities. This liquid, which in a natural ſtate is nothing but mild lymph more or leſs diluted with water, which has been abſorbed by their extremities, after being poured into the inguinal glands, is again abſorbed by other lymphatic veſſels, which carry the ſame to the abdomen, and thence through the thoracic duct into the maſs. Let us now ſuppoſe that ſome of the venereal poiſon has been abſorbed by the lymphatic veſſels of the genital parts, or the lower extremities,

* This, as well as the anatomy of the whole lymphatic ſyſtem, and the diſeaſes depending thereon, are now more fully illuſtrated by the accurate and beautiful plates of Mr. Cruikshank, Mascagni, and Haase.

and that conſequently it has been carried along with the lymph into one or more of the inguinal glands. The poiſon thus brought into the gland will either be abſorbed again by the oppoſite abſorbent veſſels, in which caſe it is carried into the maſs; or, what more frequently happens, it will, by its acrimony, excite an irritation in the gland, and thereby not only prevent its own abſorption, but produce an inflammation and ſwelling of the gland. In thoſe circumſtances, the moſt eligible thing, both for the patient and phyſician, would be, if poſſible, to deſtroy and eradicate the poiſon lodged in the gland. For this purpoſe, we know mercury is a ſpecific; but the queſtion is, how to bring it into the gland affected? Formerly practitioners, from a defect of anatomical knowledge, imagined they could introduce the mercury into the gland, by rubbing the mercurial ointment upon the gland itſelf. But ſo far was this from having the intended effect, that buboes treated in ſuch a manner generally grew more inflamed, ſuppurated, and even ſometimes mortified. By ſuch an application, no mercury is introduced into the affected gland; or, if it happens now and then, it is merely by chance; for we know, that the lymphatics ariſing from the ſkin immediately over the gland, do not take their courſe into the ſubſtance of the gland, but proceed obliquely upwards to the abdomen. Hence the bad or good effects produced in that caſe are not to be aſcribed to the mercury, but rather to the mechanical irritation occaſioned by the friction, and would probably have taken place, if any other ointment had been employed. But if, inſtead of rubbing the mercurial ointment upon the

gland

gland itſelf, the ſame be rubbed into the thigh or leg of the ſide affected, we are to expect, according to the diſcoveries of the courſe of the lymphatic veſſels, that the mercury will be abſorbed by their extremities, and from thence be conveyed to the affected gland; where, meeting with the venereal poiſon, it will moſt effectually exert its ſpecific power againſt it. That this really happens, appears from the ſucceſsful practice of this method. For if the mercurial frictions have been applied upon the proper place, and in time, before the inflammation has gone to too great a length, we find, that, in a great number of buboes, the poiſon is thereby deſtroyed, or at leaſt ſo changed in its nature, that it now is rendered incapable of irritating the gland any further. Nor do we obſerve, that the virus thus changed, and then abſorbed along with the mercury, ever afterwards produces any venereal ſymptoms in the maſs.

But let us even ſuppoſe that the mercury has not deſtroyed the poiſon lodged in the gland, but has driven it into the blood, as thoſe patients commonly believe. What will be the conſequence? The ſame, undoubtedly, as when a victorious hero diſlodges and chaſes a flying enemy before him. The very ſame remedy which drove the poiſon from the gland into the maſs, will purſue it there alſo; and either expel it altogether, or render it, one way or other, harmleſs and inoffenſive to the body.

To elucidate this matter ſtill further, I ſhall anſwer a queſtion which I have heard frequently propoſed, viz. Why does the method of rubbing mer-

cury into the extremity not always ſucceed in diſcuſſing the bubo? For the ſolution of this queſtion, we muſt have again recourſe to anatomy. Diſſections and injections ſhow, that there are two ſeries of lymphatic glands in the groin, called the upper and lower inguinal glands. In moſt people there is a communication between theſe two orders of glands: in this caſe, the lympatic veſſels of the inferior glands communicate with the ſuperior ones; whence again others ariſe, which take their courſe through the abdomen into the thoracic duct. But in other perſons there is no ſuch communication; the lympatic veſſels of the inferior inguinal glands proceed directly to the abdomen, without inoſculating with the ſuperior ones. Now, the venereal virus being abſorbed by the lymphatics of the genitals, is generally carried to the ſuperior inguinal glands, where it produces the bubo. Wherever therefore the inferior inguinal glands have the above-mentioned communication with the ſuperior ones, the mercury rubbed into the inſide of the thigh or leg will be abſorbed, carried to the inferior, and from thence to the ſuperior inguinal glands, where it will produce the deſired effect. But, on the other hand, where no communication of this kind takes place, the mercury is caried from the extremity to the inferior inguinal glands, and from thence to the abdomen, without ever reaching the affected gland; on which, of conſequence, it can produce no effect.—The ſame will likewiſe happen where the inflammation of the bubo is gone too far, or where a ſcirrhoſity is formed in the gland. Mercury, in theſe caſes, can have little or no acceſs to the gland;

or,

or though it could, would be little able to change the nature which the diſeaſe has now aſſumed.

But let us even go further, and ſuppoſe, that the method of treatment juſt recommended has not been followed; but that, inſtead of it, the irritating matter has been blunted, and the abſorption of the poiſon from the gland has been effected by other ſedative or diſcutient applications. What will be the conſequence? I anſwer, inſtead of a bubo, the patient will probably be affected with a diſeaſe of the whole ſyſtem? which, if recent, may be eaſily and radically cured in a few weeks time, without any bad conſequence remaining; whereas the complaint with which he was affected before, is ſometimes not only very dangerous, and at other times extremely obſtinate, but always of a very tedious nature. Beſides, even when the ſuppuration is of the beſt kind, which, however, is far from being always the caſe, the poiſon, before or after the abſceſs is formed, inſtead of being entirely evacuated, is, if not conſtantly, at leaſt very frequently, abſorbed into the ſyſtem. Thus the diſorder which the patient ſo much dreaded is really produced; for the cure of which he will at laſt be obliged to have recourſe to mercury, the remedy he was formerly ſo much affraid of.

Let us now proceed to the method of cure.

Method of Cure.

From the obſervations laid down, it appears, that every unprejudiced practitioner, in any caſe of an idiopathic

idiopathic bubo, ſhould always attempt to diſcuſs it as ſoon as poſſible, by any method whatever, provided the inflammation has not riſen to too great an height, or ſigns of ſuppuration have already made their appearance.

The moſt effectual method of diſcuſſing tumors of this kind, is, as I have already mentioned, by mercurial frictions applied to the inſide of the thigh or leg of the affected ſide, if the bubo happens to be inguinal; or to the arm, if the bubo be under the armpit. Occaſionally alſo, in the former caſe, frictions may be uſed to the perinæum or ſcrotum. But as the ſucceſs of theſe frictions is limited to a few days, they ought to be made not only with due care and attention, but, if circumſtances permit, be repeated twice a-day. Veneſection or purges, together with cold topical applications, will, occaſionally, greatly contribute to the intended effect.

Mr. *Birch* found, in repeated inſtances, that gentle electrical ſhocks, paſſed through the thigh and gland affected, greatly aſſiſt the mercury in diſcuſſing the bubo; and, in ſome caſes, produce that effect, without any mercurial friction, even in buboes much advanced.

To the gland itſelf I never apply any thing but a mercurial plaſter; and from this I expect nothing towards the accompliſhment of the cure, but make uſe of it only to keep the patient's mind eaſy. In obſtinate caſes alſo, I would adviſe the application of dry cupping glaſſes to the ſwelled gland, which has been attended

attended with ſucceſs in the Edinburgh Infirmary. Repeated vomits, with applications of cold water to the part affected, have been likewiſe recommended as uſeful for the diſcuſſion of a bubo; but I have never had occaſion to try either of theſe remedies. The volatile liniment, rubbed into, and round about the bubo, for eight or ten minutes, once or twice a-day, has been found very effectual to this purpoſe, in ſeveral inſtances, by Dr. *Nooth*.

During the whole time that we attempt the reſolution of a bubo, the patient ought to abſtain from exerciſe, and confine himſelf to a very low diet; as a contrary regimen might greatly tend to increaſe the inflammation. With regard to mercurial frictions on the gland itſelf, I have already given my reaſons for diſapproving of them. Indeed, moſt of the idiopathic buboes which I have ſeen treated, either in this way, or by other irritating remedies, have inflammed and ſuppurated, though the application was made with a view to prevent this diſagreeable circumſtance; and there are now but very few practitioners, let their knowledge of the recent diſcoveries concerning the lymphatic ſyſtem be ever ſo confined, who would truſt to this application for producing a diſcuſſion.

When I ſay that a local irritation of the gland will rather be followed by an inflammation and ſuppuration than a reſolution, I purpoſely mention the idiopathic venereal bubo; for ſympathic buboes do certainly, as I have obſerved, frequently diſappear after the uſe of mercurial frictions applied upon the gland itſelf.

itſelf. We ought not, however, even in this caſe, to aſcribe the reſolution to the mercurial frictions, poultices, &c. which have been applied, but to the ſimple operation of nature; becauſe ſympathic buboes will always go off by themſelves without any application whatever. For their removal, as I have already obſerved, nothing more is requiſite than to abate or remove the ſtimulus from the mouths of the lymphatics or neighbouring glands. This fact is ſufficient, I think, to convince us of the importance of diſtinguiſhing in practice the idiopathic buboes, or ſuch as owe their origin to the venereal virus abſorbed from ſhankers of the genitals or extremities, from ſympathic ones, ariſing from the mere irritation of the lymphatic veſſels, and generally accompanying ſimple claps, ſwelled teſticles, &c. without the appearance of any venereal ulcer.

Thus far with regard to the treatment of venereal buboes by reſolution. I now come to ſpeak of thoſe that are either too far gone to admit of a reſolution, or that reſiſt it on ſome other account.

That a bubo will not admit of a reſolution, we know by the tumour continuing to increaſe in ſize, and becoming red and painful after the proper application of the mercurial frictions or other reſolvents have been made uſe of for four or five days. As ſoon as we ſee theſe our attempts to procure a reſolution fruſtrated, we muſt endeavour to bring on a mild and ſpeedy ſuppuration. Here, however, we ſhall often meet with great difficulty, buboes being ſo eſſentially different from one another, that the treatment

treatment which will bring the one kind to a mild ſuppuration, if applied to the other, will not only occaſion very dangerous conſequences, but even prove fatal to the patient.

They may, as far as I can judge, be brought moſt properly under the following three different heads.

In the *firſt*, all the ſymptoms of a real inflammation run very high, ſometimes even to mortification; in the *ſecond*, the ſame ſymptoms ſeem to ariſe from too great an irritability of the body; whereas, in the *third*, the moſt irritating medicines are hardly able to raiſe the inflammation to ſuch a pitch as is neceſſary for bringing on a ſuppuration. In the *firſt* or true inflammatory bubo, our intention muſt be to moderate the inflammatory ſymptoms; in the *ſecond*, to allay the irritability; and in the *third*, to ſtimulate and excite.

In the *firſt* kind, therefore, when the patient is otherwiſe of a healthy, ſtrong, and vigorous conſtitution, the inflammation high, the pain ſevere, and accompanied with an inflammatory fever; bleeding, ſometimes even repeated as circumſtances require, will be neceſſary. Leeches, however, or in want of them, ſcarification of the part affected, are often preferable to general bleedings. In other reſpects, reſt, a low diet, cooling drink, antiphlogiſtic purge, the warm bath, and an emollient poultice applied conſtantly warm to the gland, and changed when it grows cool, are the means to be inſiſted upon in this ſpecies of bubo.

In the *ſecond* kind, the ſymptoms of inflammation ſeem to run likewiſe very high, but merely from too great an irritability of the ſyſtem. This we may eaſily diſtinguiſh from the former, by the weaker, ſmoother, and more frequent pulſe; as alſo by the conſtitution of the patient. In ſuch circumſtances, general evacuations, inſtead of being of ſervice, I conſtantly obſerved to be prejudicial. On the contrary, a fuller diet; opium every night or every other night, and the Peruvian bark through the day, ought to be given; and to the external emollient are here properly joined ſome ſedative applications. It was, probably, in a caſe of this kind, that Mr. *Brambilla* ſaw a bubo prove gangrenous and fatal, after a courſe of calomel along with a ſtrong decoction of the woods was adminiſtered to the patient. I muſt, upon this occaſion, make the general remark, that mercury ſhould never be adminiſtered either internally or externally, during the inflammatory ſtate of a bubo, or any other venereal complaint, unleſs we have ſome very urgent reaſon. During that ſtate, I have never ſeen any good, but frequently very bad effects reſulting from its uſe, and more eſpecially when rubbed into the part affected.

The *third* kind of buboes, eſſentially different from the two former, we frequently meet in patients of a relaxed, debilitated, cachectic, or ſcorbutic habit of body. When this is the caſe, the tumour of the gland, though red and inflamed, riſes very little and very ſlowly; the patient feels but little pain; no fever attends; or, if any, it is rather of the low kind, and the pulſe is weak, accompanied with a depreſſion of

of ſpirits.—In ſuch caſes, we muſt endeavour either to diſcuſs the ſwelling, or to bring the bubo to ſuppuration. The former we obtain by repeated purgings or emetics; and lately, a poultice made of the root of the *Atropa Mandragora* has been recommended for that purpoſe, and by others a poultice made of the root of *Daphne Mezereum*. They both deſerve to be tried in obſtinate hard ſwellings of this kind; but their acrid nature ſhould keep us carefully upon our guard. For the latter, the adminiſtration of mercury, internally as well as upon the part affected, will ſometimes be uſeful and even neceſſary; but evacuations of any kind are always hurtful: a full diet with wine, an infuſion of Peruvian bark in wine, or ſome other ſtrengthening and aromatic medicines, together with local applications more or leſs ſtimulant, ſuch as the common plaſter with gums, a poultice made of onions roaſted or boiled in oil will be moſt proper.

If ſymptoms of the ſea-ſcurvey prevail, mercury ought never to be made uſe of; but the patient ſhould, beſides the uſe of wine and Peruvian bark, &c. eat oranges and other ripe fruit, or make uſe of the juice of antiſcorbutic herbs, or a decoction of malt, and take moderate exerciſe in free open air every day.

When by any of the above-mentioned means, the bubo is at laſt brought to ſuppuration, and an abſceſs is formed, moſt writers adviſe the artificial opening of the abſceſs with the lancet or cauſtic; but this I think ſhould almoſt always be rather left to nature.

I have found, that nature, left to herſelf, ſcarce ever fails to make an opening in due time; whereas artificial openings are often made before the abſceſs is fully formed and ripe. I have beſides obſerved another advantage from this practice, viz. that the abſceſs opened by nature generally heals much eaſier; whereas that opened by an inciſion, or the application of a cauſtic, we ſee not unfrequently followed by diſagreeable conſequences. The cure is thereby often rendered extremely tedious and troubleſome, and always a viſible cicatrix left behind; which laſt we ought to make an eſſential point carefully to avoid, eſpecially in women, for reaſons ſufficiently obvious. If the operation be left to nature, the abſceſs will generally not burſt till there is a complete ſuppuration of the gland; and the cicatrix in a ſhort time after, for the moſt part, entirely diſappears, or remains ſcarcely viſible.

THERE are, however, ſome caſes in which it may be proper to aſſiſt nature, and either make a dilatation of the opening, or make an artificial opening altogether. If buboes, notwithſtanding the means abovementioned, remain inflamed and hard, without either coming to reſolution or ſuppuration, a ſmall bit of the lunar cauſtic, about the ſize of a pea, may be advantageouſly applied to the middle of the bubo, for about two, or at moſt three hours, the eſchar afterwards to be anointed with a little of the ſtrong blue ointment, and the whole covered with a warm emollient poultice. This method, firſt propoſed by Mr. *Plenck*, I have ſince ſeveral times followed with ſucceſs.

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HERE I muſt add, that, in ſeveral inſtances, I have obſerved the common method of applying a large cauſtic on the bubo for ten or twelve hours, in order to bring it to ſuppuration, attended with very bad conſequences. The event, in two caſes, was a mortification, and in others a large ichorous ulcer, which in one inſtance ſeemed to aſſume a cancerous appearance, and at laſt proved fatal to the patient. This I have never ſeen happen from the application of a ſmall piece of the cauſtic as above mentioned.

WHEN the abſceſs has been opened either by nature or art, it is called an *exulcerated Bubo;* in which the ſame diſtinctions ought to be carefully obſerved as laid down above, when I ſpoke of inflamed buboes,

MANY writers adviſe in this caſe, to adminiſter mercury internally and externally, and thus treat the ulcer as a venereal one. This practice may be undoubtedly very good in ſome caſes; but, in others, a mercurial courſe will prove hurtful, and often give riſe to very dangerous conſequences.

No general method, I think, can be laid down for the treatment of an exulcerated bubo; but the practitioner ought to be entirely directed by the nature of the diſeaſe, and the conſtitution of the patient, as mentioned above. If the patient be vigorous, without fever, the pus mild, and of a good conſiſtence, no external application to the ſore ſeems neceſſary; and if any thing is to be applied, a continuation of the ſame poultice which was applied before the abſceſs burſt,

burſt, will certainly forward the cure more than any thing elſe. If the abſceſs aſſumes the nature of a venereal ulcer, a courſe of mercury may be proper; but with regard to topical applications of mercury, in thoſe caſes, we ſhould be highly cautious, leſt we bring on a complaint, of which I have ſeen ſeveral melancholy inſtances.

But if, under the adminiſtration of our medicines, whatever they be, the abſceſs, inſtead of healing, either remains in the ſame ſtate, or aſſumes a relaxed and flabby appearance, and the diſcharge grows copious, thin, and ichorous, and, at the ſame time, the health of the patient, inſtead of growing better, gradually grows worſe and worſe; a different treatment will be neceſſary. If mercury had been adminiſtered, and has produced ſome ſenſible effects in the maſs, we ſhould not obſtinately inſiſt to aſcribe the preſent ſymptoms to the inefficacy of the mercurial preparation we have made uſe of, and conſequently have recourſe to another: we rather ought to take the hint given by nature, and not perſiſt any longer in the uſe of a remedy from which no good effect had followed.—Mercury is a poiſon for thoſe patients; and ſo is likewiſe the hoſpital air. A decoction of the Peruvian bark in milk, a decoction of ſarſaparilla with antimony, the powder of ſarſaparilla with milk, (if the patient bears milk,) a full diet, wine, an infuſion of the bark in wine, with the free uſe of country air, and gentle exerciſe, are the medicines required. To the ulcer, an injection with the aqua vitriolica camphorata, or, according to circumſtances, a fomentation with the Peruvian bark

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repeated twice or three times a-day, is the neceſſary application; and the ſore ſhould be covered with fine lint or a piece of ſoft ſponge, that the matter may freely diſcharge. The dreſſings may be kept on by a piece of adheſive plaſter ſpread on linen. To prevent excoriations on the thigh from the acrid diſcharge of ſuch ulcers, the application of a little white cerate to the ſurrounding parts will be neceſſary *.

The following caſe may ſerve as an illuſtration of what I have juſt now aſſerted. An ulcerated bubo was, according to the common courſe of practice, treated as a venereal ulcer, by the internal and external uſe of mercury. The patient, by this method, after eight weeks time, was ſo much reduced, and the ulcer had aſſumed ſo bad an appearance, that it was thought proper to have the advice of another phyſician. Being conſulted, I found, upon examination, the flabby relaxed *atonic* appearance of the ulcer which I mentioned above. I told the phyſician and ſurgeon, who hitherto had treated the patient, that I thought the continuation of mercury improper; and that the internal and external uſe of ſtrengthening medicines, and a full diet with wine, were now the only proper remedies. They both thought my advice unſeaſonable; and that it was more proper to continue the uſe of mercury, only with a different preparation. However, after a good deal

* Mr. Foot has ingeniouſly applied to this kind of exulcerated bubo, commonly called *phagedenic bubo*, the ſame method, which effectually anſwers in ulcers of the legs of the ſame kind, with the ſame ſucceſs, viz. a vitriolic ſolution with the ſtrait bandage.

deal of converſation, I prevailed on them to try only for eight or ten days what I had propoſed; and the patient finding himſelf the better for the courſe he began, continued the ſame for about ſix weeks, when he was perfectly recovered.

A SIMILAR caſe occurred ſome time ago to a friend of mine in London, who gave the ſame advice to a patient that had been treated for a long time with mercurials, and the patient found the ſame benefit from the change. A remarkable circumſtance which happened with this latter patient, I muſt take notice of. Under the courſe of mercurials he ſuffered violent ſweats every night; for which he put on every morning a clean ſhirt made of new linen; all theſe ſhirts, about a dozen in number, after having been once or twice waſhed with other linen in the common manner, grew ſo tender, that they ſeemed to be perfectly rotten.

IF, after a ſuppuration has taken place, and the abſceſs been opened, part of the gland ſhould ſtill remain ſwelled and hard, repeated purges, with the continued uſe of the medicines, recommended above for indurated buboes, will effectually remove this diſorder.

THE *ſinuſes* or *fiſtulas*, which are ſometimes apt to ariſe after ſuch ulcers, are for the moſt part eaſily prevented, as well by proper injections as by a ſuitable poſture of the patient when in bed, and by a gentle, but careful, preſſure, ſqueezing out the matter all round, every morning and evening.—If fiſtu-

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las or ſinuſes have been formed from an ulcerated bubo, and refuſe to yield to the injections mentioned, the knife muſt be employed. Theſe complaints, however, ſeldom or never occur, if the ſurgeon, in order to give a free diſcharge to the matter, be attentive to the poſture of the patient, dilate the opening in time, if neceſſary, and the patient comply exactly with his directions.

Buboes grow now and then *gangrenous*, from a high degree of inflammation; but more frequently after they have been improperly opened, eſpecially in irritable habits, or in ſcorbutic patients. The foul air of hoſpitals proves often fatal to ſuch patients, and retards likewiſe very much the cure of all exulcerated buboes. Mercury increaſes the mortification. The Peruvian bark, or in ſome circumſtances, large doſes of opium internally; and the ſame bark, or the arnica root in powder, or camphor diſſolved in vinegar, are the moſt effectual remedies externally.

Hemlock, both internally and externally applied has been ſtrongly recommended for *cancerous*, as well as ſcirrhous buboes: but I never ſaw it effect a radical cure where there was a real cancer; though there is nothing to hinder its being tried: but in ſuch caſes, the only method that I know for avoiding death, or at leaſt a moſt miſerable life, is the total exciſion of the cancerous gland, if practicable; and this, if we wiſh to ſave our patient, ſhould not be too long deferred.

HAVING thus finiſhed the treatment of topical venereal complaints, I now proceed to thoſe ariſing from an univerſal infection, or, as it is commonly called, a *confirmed pox*.

CHAP.

CHAP. XI.

On the SYPHILIS *or* VENEREAL DISEASE *in particular.*

HAVING premiſed ſome neceſſary obſervations concerning the venereal infection, the nature of the virus, and the different appearances of ſyphilitic complaints in general, in the beginning of this treatiſe, I now enter, in particular, into the conſideration of the nature, ſymptoms, and cure of the ſyphilis or venereal diſeaſe, commonly called a *confirmed lues* or *pox*.

THE effects or ſymptoms which the venereal virus is apt to produce when abſorbed into the maſs, are, now a-days, ſhortly as follow.

1. *In the eyes:* The moſt violent inflammation, with a diſcharge of puriform matter (from a retropulſed clap), ending generally in perfect blindneſs; or an ophthalmy of a more chronic kind (from the venereal virus depoſited from the maſs), affecting the eye itſelf, or the eye-lids; and ſometimes alſo producing the fiſtula lachrymalis.

2. *In the ears:* Tingling in the ears; deafneſs, with or without a puriform diſcharge, either from a retropulſed clap, or from the venereal virus affecting the ear, or the orifice of the Euſtachian tube in the fauces.

3. *In the noſe:* Ulcers in the noſtrils; an ulceration of the mucous membrane of the noſe, with a caries of the bones, eſpecially of the ſeptum; whence the disfiguration of the noſe, which we ſee now and then in people walking in the ſtreets; or a diſcharge of fetid ichor, known by the name of *ozæna ſyphilitica.*

4. *In the mouth and throat:* Ulcers, caries of the oſſa palatina or antrum maxillare, eroſion of the velum, &c. ſore throat, coryza, paraphonia.

5. *In or about the genital parts*, it produces, or proves a perpetual fomes of excoriations, ulcers, fiſtulas, gleets, warts, condylomata. Whether claps, ſwelled teſticles, or buboes, ever ariſe from the poiſon being depoſited to thoſe parts from the maſs, is with me, for want of authenticated facts, ſtill a matter of doubt.

6. *In the ſkin:* Copper-coloured ſpots, ſcurf, tetters, ſcabs, eſpecially on the margin of the ſcalp, or in the beard; a ſcald head, or tinea; and when the diſeaſe is very inveterate, and ſomewhat degenerated, it ſometimes, though ſeldom, produces a kind of leproſy over the whole ſurface of the body; a corruption of the nails, and ulcers of the moſt obſtinate kind in different parts of the body.

7. *In the bones:* Either the moſt excruciating pains and ſwellings, commonly called *tophi exoſtoſes*, &c. eſpecially troubleſome at night when the patient grows warm in bed; an ulceration in their external,

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or a corruption of their internal ſubſtance, diſeaſes known by the name of *caries* and *ſpina ventoſa*. The bones moſt liable to be affected by this diſeaſe, are thoſe which are not covered with muſcles, as the tibia, the radius, the elbow, the proceſſus coracoideus, ſternum, the os frontis, and other bones of the head, &c.

8. Sometimes the venereal poiſon will produce effects, the nature of which is ſo concealed, that they ſeem rather ariſing from ſome other cauſe. Such are pains in ſeveral parts of the body, reſembling thoſe of the rheumatic kind; pains in the articulations, reſembling the gout; aſthma; nervous or hectic fevers; conſumptions of the lungs, or ſimple emaciation without any apparent vice in any viſcus of the body. Theſe ſymptoms have, among phyſicians, obtained the name of *morbi venerei larvati*. It is, however, to be obſerved, that many of theſe ſymptoms are not unfrequently owing to the improper adminiſtration, and conſequent bad effects, of mercury.

9. Sometimes the lues is really combined with other diſorders; ſuch as the ſea-ſcurvy, intermittent fevers, conſumptions, &c. Theſe are called *morbi venerei complicati*, and deſerve the utmoſt attention of the practitioner; becauſe the ſucceſs of the cure will often, in a great meaſure, depend on the accurate knowledge and diſtinction of theſe complaints.

The ſpecific remedy now generally applied for all kinds of venereal diſorders, is mercury in its different preparations. Though there are perhaps reme-

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dies of the vegetable kingdom as powerful as mercury, to cure the venereal diſeaſe in all its ſtages, yet, being either unknown, or difficult to be got, they are now generally neglected. Mercury is made uſe of, not only on account of its ſpecific power againſt this diſorder, but becauſe it is a remedy which is cheap, eaſily to be got, and quick and certain in its effects; in the ſame manner, though we are able to cure agues by other remedies, we employ now-a-days ſeldom any thing elſe but the Peruvian bark.

Several hypotheſes have been advanced to explain the manner in which mercury produces thoſe powerful effects. None of them ſeems to be founded on real facts; all of them are therefore little ſatisfactory. Some ſay, mercury acts by its metallic weight; others, by its aſtringent quality; and others, again, by its power of promoting all kinds of excretions, &c. If thoſe writers had only conſidered, that ſometimes two or three grains of mercury brought into the maſs, make the moſt violent venereal ſymptoms diſappear, I think they would have never had recourſe to ſuch explications. Perhaps, if there was an opinion to be advanced about this matter, chemiſtry could afford us a more reaſonable and ſatisfactory theory; by ſuppoſing, that mercury has a peculiar attractive power, or what is commonly called a *chemical affinity*, to the venereal poiſon; by means of which, wherever it meets with that poiſon, it readily unites, and forms a kind of compound with it, which then has no longer any of the qualities which either of the ſubſtances had before the union; and therefore the effect produced by the poiſon muſt,

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in the moment that union takes place, unavoidably ceaſe, and the patient find himſelf either relieved, or, if the poiſon has been ſaturated with a ſufficient quantity of mercury, radically cured. By this theory we would perhaps be more able, not only to account for a few grains of mercury relieving ſometimes the moſt excruciating venereal pains of the bones, but alſo why mercury taken internally removes venereal ulcers, without any external application, &c. It would further ſeem probable from theſe effects, that mercury has a greater chemical attraction to the venereal poiſon than it has to any acid; and that, given in any of its ſaline preparations, wherever it meets with that poiſon, it leaves immediately the acid with which it was combined, and unites with the poiſon *. I could ſupport this opinion, perhaps, if I added, that mercury cures the venereal diſeaſe the eaſier and ſooner the more minutely it is divided; that, in order to produce the deſired effect, it is always neceſſary that it be abſorbed into the maſs; but that it never cures the venereal complaints though abſorbed into the maſs, if not carried in ſufficient quantity to the place or part affected. In this manner we could perhaps eaſier explain why it often cures the venereal diſorder without any ſenſible increaſe of any of the different ſecretions or excretions of the body; and why, if it produces purging, immoderate ſweating, or ſalivation, it very often leaves

* It is a very remarkable circumſtance, which one day or other may ſerve to clear up this theory, that mercury has the greateſt affinity to, or, as I ſhould ſay with more propriety, that of all known acids, that of the animal fat (*acidum ſebi*) has the greateſt attraction to mercury.

leaves the venereal diſeaſe uncured behind. But though we could thus reſolve all theſe different queſtions in a more ſatisfactory manner, I muſt confeſs that this theory is as little as the former founded on any real fact, but on mere conjecture; and therefore, as long as it remains in this ſtate, it is equally uſeleſs as all other hypotheſes in the practice of phyſic, where it may be ſufficient for us to know the ſpecific remedy to cure the diſorder, without being acquainted how it produces its effects; though ſuch a knowledge, could it be attained, would lead undoubtedly to great improvements in the practice of phyſic.

Method of Cure.

If the patient be ſtrong enough to bear the immediate uſe of mercury, I begin generally by giving him a purgative; and the next day I let him bathe in a warm bath, made of a decoction of bran, or of ſimple ſoft water. In this bath, the warmth of which ſhould be determined by the agreeable feeling of the patient, he ought to ſit for half an hour or an hour's time; during the latter end of which time, he ſhould be rubbed gently all over with a fleſh-bruſh or a piece of flannel. Coming out of the bath, he may take a glaſs of good wine, if his circumſtances will admit of it, and then go to bed. By theſe means the ſkin will be well cleanſed, and be better fitted for tranſmitting the perſpiration. If he be plethoric, or accuſtomed to bleeding, veneſection may be proper and uſeful, previous to his beginning the uſe of mercury.

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With regard to the ſeveral mercurial preparations made uſe of for the cure of venereal complaints, I ſhall ſpeak hereafter. What we ſhould firſt obſerve moſt carefully and attentively, is, whether the mercurial courſe we began agrees with the patient; and if it does not agree, without heſitation, change it. Thoſe patients who will not bear frictions, bear ſometimes very readily the internal uſe of mild or more acrid preparations of mercury, and *vice verſa;* others, who will not bear mercury internally, will bear the frictions, or ſometimes not bear one mercurial preparation, while they bear another very readily. Some will take it more eaſily in pills, others in powder, or diſſolved in ſome liquid. To thoſe whoſe conſtitution, circumſtances, or choice, are againſt mercurial frictions, we may give Plenck's ſolution of mercury in gum-arabic, made into pills; or mercury triturated, and formed into pills with the extract of liquorice. Theſe preparations agree with moſt ſtomachs, even ſuch as ſometimes can bear no other mercurial preparation. In other caſes, calomel prepared by precipitation according to Mr. *Scheele's* invention, or the hydragyrum nitratum cinereum *(pulvis mercurii cinereus)* of the new Edinburgh Pharmacopœia, are the mildeſt and perhaps moſt ſuitable preparations for thoſe ſtomachs which are not able to bear any of the more acrid ſaline mercurial preparations. Mercury rubbed down with ſugar-candy, or calcined mercury mixed with opium may ſometimes, according to circumſtances, be more advantageous; but, as I have mentioned before, great judgment and attention are required in adminiſtering thoſe medicines, as well as with regard to diet, bath-

ing, &c. about which it is impoſſible to enter into a minute detail of every particular circumſtance. The following rules, however, beſides thoſe to be mentioned below under the head of *Mercurial Preparations*, may ſerve as general ones.

The patient whom we undertake to cure of the lues, muſt have ſufficient ſtrength to bear the uſe of mercury; and neither be affected with any nervous, hectic, or inflammatory fever, nor with ſea-ſcurvy, cancerous complaints, or gangrenous ulcers. In all theſe caſes, I have conſtantly obſerved mercury not only prove hurtful, but in ſome inſtances, where its uſe was inſiſted upon, even fatal to the patient. Theſe diſorders, if poſſible, ſhould therefore be previouſly removed; or if the venereal ſymptoms prevail ſo much, that they render the immediate uſe of mercury indiſpenſibly neceſſary, proper medicines ought to be conjoined with mercury.

For reſtoring a proper degree of ſtrength and vigour, an healthful country air is one of the firſt requiſites; then aſſes or cows milk, as it comes from the animal; or, what in ſome inſtances I have found far better for patients in eaſy circumſtances, a ſtrong healthy country wet-nurſe, whom the patient may ſuck himſelf; or if he finds this diſagreeable (or perhaps dangerous), the breaſt of the woman may be drawn with a proper inſtrument, and the patient ſhould drink the milk immediately after: this milk is the greateſt ſtrengthener I know of for debilitated patients. His diet may otherwiſe conſiſt of light puddings; tender meat of middle-aged animals of all kinds,

kinds, eſpecially roaſted, not too fat; and, at dinner, if he likes good ſtrong beer (or porter), he may drink it; otherwiſe a few glaſſes of good and genuine Spaniſh or Hungarian wine will be uſeful. Moderate exerciſe of any kind, and occaſionally frictions of the whole body, will greatly aſſiſt the above regimen. As for medicines, if their uſe ſhould be abſolutely neceſſary, or if the patient deſire any, ſmall doſes of the beſt Peruvian bark, finely powdered in ſubſtance, or mixed with cinnamon-water or genuine old hock, I have found excellent. If the patient be very low, iron diſſolved in vitriolic æther, I have found ſuperior to any other medicine. The cold bath will be ſometimes uſeful, but at other times I have ſeen it prove rather hurtful. This, with cheerful company, and avoiding venery or nocturnal pollutions, will greatly contribute to recover the ſtrength neceſſary for enabling the patient to bear the uſe of mercury. I ſhall, however, make one remark more here, which, as far as I know, has not been taken notice of by any former writer on this ſubject, viz. that weakneſs, low-ſpiritedneſs, and anaphrodyſia, are ſometimes the immediate effects of the venereal virus lurking in the body; and, in that caſe, I have obſerved mercury to be the beſt ſtrengthener. I have ſeen people in that ſtate gain ſo much ſtrength in eight or ten days, from the internal uſe of mercury, that they found themſelves moſt agreeably ſurpriſed.

During the uſe of mercury, a mixed diet of vegetables and animals, as the moſt natural to mankind in general, is proper; avoiding fat, hard, indigeſtible food. Acids will ſometimes cauſe a griping or

purging under a courſe of mercury: where that happens, they ſhould be avoided. At table, the moderate uſe of wine cannot be hurtful. As to porter, or any other kind of beer, it does not agree with all ſtomachs under a mercurial courſe; where it does, I ſee no reaſon why it may not be moderately indulged, and I never ſaw in thoſe circumſtances any harm from it. But what I principally inſiſt upon is, that the patient ſhould go early to bed every day; as indulging ſleep ſeems rather ſerviceable during a mercurial courſe. Moderate exerciſe on foot, in a chaiſe, or on horſeback, in a warm and dry day, I found always more uſeful than confinement to a room; but if the weather be moiſt or very cold, it will be ſafer to ſtay at home. Night air is particularly dangerous; for it is in general cold and damp, and ſhould be therefore, by every patient under a mercurial courſe, moſt carefully avoided. I have known ſeveral inſtances, where venereal patients, during the uſe of mercury, through inattention to this ſingle point, have ruined their health and conſtitution for years, or even for life. Where the patient's buſineſs or circumſtances of life abſolutely oblige him to go out in very cold or damp weather, he ſhould never do it without having on warm cloaths, a flannel or callicoe waiſtcoat under his ſhirt, and a pair of good warm woollen ſtockings.

Thus we proceed with the uſe of mercury, if no peculiar ſymptoms prevent it; and at the ſame time, order the patient to bathe once or twice a-week in a warm bath, if his conſtitution be ſtrong enough: weak and relaxed habits will not admit of this. But whenever

whenever he perceives a nauſeous taſte, like copper in the mouth, ſtinking breath, ſwelling of the gums, the teeth feeling as if they were ſet on edge, a larger ſecretion of ſaliva or ſpitting than common, mercury ſhould be immediately left off for ſome days; a warm bath and frictions with the fleſh-bruſh to be uſed in ſome caſes; a gentle phyſic to be taken and occaſionally repeated: and cold moiſt air in thoſe circumſtances to be moſt carefully avoided. If under the uſe of mercury ſymptoms of a general irritation appear, it ought to be left off for ſome days, and a doſe of opium to be given in its ſtead: but if ſymptoms of an inflammatory diatheſis prevail, bleeding will be neceſſary. Thus we continue with the uſe of mercury, as I ſaid, till the virus is wholly eradicated, which will generally be in twenty-five or thirty days, if the diſeaſe has not been of long ſtanding, and the ſymptoms have not been very ſevere; but if the diſeaſe be inveterate, and the ſkin or bones ſeverely affected, ten or twelve weeks will be ſometimes neceſſary to produce a complete and radical cure

Another circumſtance to be attended to during a mercurial courſe is, that ſuch patients ſhould be previouſly told of the effects of mercury on gold, ſuch as rings, watches, &c. By not attending to this particular, diſagreeable diſcoveries may ſometimes be made, which female patients eſpecially have great reaſon carefully to avoid.

To know whether the lues is radically exterminated, is a nice point of practical judgment; and if I ſay,

ſay, that, from a careleſſneſs on the part of the patient, or from want of knowledge on the part of the practitioner with regard to this point, a great many patients are unhappy, and ſufferers; I advance nothing but what we ſee daily confirmed. If we were in poſſeſſion of a remedy, which, having the power of rendering the leaſt particle of the venereal virus, concealed in the body, active, and thus enable us to diſcover its preſence, in like manner, as the loadſtone diſcovers the preſence of iron, there would be nothing neceſſary, but to adminiſter that remedy the moment we think the patient had taken mercury enough. I have made ſome experiments on this ſubject; but the number of facts are not yet ſufficient to enable me to form a concluſion.

As ſoon as the mercury affects the mouth of the patient, we are ſure of the moſt eſſential point, viz. of its having entered the maſs, which as was obſerved above, is a point abſolutely neceſſary for eradicating the poiſon. The diſappearing of internal venereal ſymptoms, and more ſo that of the external ones, is another, not unequivocal ſign, that the mercury has exerted its action upon the venereal virus. If venereal ulcers which aroſe from an infected maſs begin to mend or heal, if pains or tophuſes of the bones begin to diſappear, &c. under the uſe of mercury, we are ſure of its having entered the maſs, and removed the effects of the venereal poiſon; but we are not yet ſure of its having eradicated entirely all the poiſon preſent in the body. For this reaſon, we ought to continue the ſame uſe of mercury for a fortnight or three weeks, after all the venereal ſymptoms have

have entirely disappeared; and then we may generally be pretty confident that our patient is radically cured of the disorder.—I have observed in several patients who bore the internal use of mercury extremely well, as long as the disease took place; whereas, on the moment the poison was eradicated, they began to nauseate it; which proved to be the standard of their being radically cured.

But we are to observe, that though the venereal poison has been perfectly eradicated, and the venereal disease consequently radically cured, there are many instances where exostoses, knots, or swellings of the bones, owing their origin to the venereal poison, continue, however, all the life through, without any bad consequences. A caries of the bones will often remain, till nature herself, or assisted by art, has made the exfoliation. Venereal excrescences remaining after a mercurial course, are to be looked upon as local complaints, and to be removed by local remedies. It has been a general observation, and I have seen it confirmed in several instances, that the venereal disease yields easier to a proper treatment in warm and dry climates or seasons, than in cold and damp ones. This is the reason that has rendered Montpelier so famous for curing the most obstinate and confirmed lues. This is likewise the reason that people, who are not cured of venereal complaints at Petersburgh or Stockholm, &c. are sometimes cured when they go to Italy, or Portugal; and for the same reason they sometimes will bear mercury there without the least inconvenience, till they are perfectly cured, when they could scarcely bear a few

few grains of it in cold or wet countries without falling into an immediate ſalivation. I have ſeen ſeveral ſtriking inſtances of this kind: and it does not ariſe from ſome peculiar balſamic particles of the air in the South of France, Italy, or Portugal; nor from any particular or ſuperior ſkill of the phyſicians at Montpelier, above thoſe of London, Stockholm, &c. as the patients often wrongly imagine; but merely becauſe the atmoſphere in thoſe climates is dry and warm, and not unfrequently becauſe the formerly neglectful patient becomes now more careful, and pays a more exact attention to the advice of his phyſician or ſurgeon.—A ſkilful phyſician, however, will be able to put his patient, in any country whatſoever, in a ſituation which he finds neceſſary for curing this complaint, by producing for ſome weeks or months an artificial climate, by means of flannel, as adequate and effectual for him as the natural warm climate of Montpelier, Naples, or Liſbon.

CHAP.

CHAP. XII.

On the NEW VENEREAL DISEASE *which of late made its Appearance in* CANADA.

A NEW diſeaſe broke out ſome time ago in Canada, eſpecially in St. Paul's Bay; whence it has been called *Le Mal de la Baye de St. Paul* (the diſeaſe of St. Paul's Bay.) This diſeaſe has made a rapid progreſs within theſe few years among the inhabitants of Canada. The parents tranſmit it to their children. It is communicated by eating, drinking, &c. If it once enters into a family, rarely any one eſcapes catching it. Some habits ſeem to abſorb the poiſon; and then ſometimes it remains concealed or quiet for years, and breaks out at laſt with all the ſymptoms of the third ſtage. The patients often dragging out a miſerable exiſtence to old age, loſe by degrees eyes, noſe, cheeks, vellum pendulum, and the whole baſis of the ſkull, &c. They call it *Mal Anglois* (the Engliſh Diſeaſe,) becauſe they think the Engliſh brought it firſt amongſt them. In ſeveral places, however, they give it different names. At St. Paul's Bay the people call it *la Maladie des Eboulements;* in the neighbourhood of Boucherville, it is called *Luſtu Crue;* and at Berthier and Sorel, *la Maladie de Chicot.* The name of *Vilain mal*, *mauvais mal*, and *gros mal*, are common in many pariſhes. Where it is of more modern date, they call it *la maladie Al-*

lemande (the German diſeaſe), as if it had been brought to them by the German troops; but the name *mal Anglois* is the moſt frequently uſed. There were, in the year 1785, five thouſand eight hundred and one perſons diſcovered to be infected with it, beſides many who concealed it; but it was at that time ſtill unknown among all the neighbouring Indian tribes.

It firſt manifeſts itſelf generally by little ulcers on the lips, tongue, and inſide of the mouth; *rarely in the genitals*. Theſe little ulcers are of a very corroſive nature, and were obſerved in many children to have nearly deſtroyed the tongue. They firſt appear in the form of little puſtules, filled with a whitiſh purulent matter; the poiſon of which is ſo infective, that it communicates by eating with the ſame ſpoon, by drinking out of the ſame mug, by ſmoking tobacco with the ſame pipe; nay, it is even obſerved, that it is communicated by linen, cloth, &c.

This poiſon being abſorbed from the ulcers, or, as it often happens, originally abſorbed without any external ſymptoms whatever, breaks out afterwards either in large ulcers, or manifeſts itſelf by violent nocturnal pains of the bones. The ulcers breaking out in the ſkin or mouth, diminiſh the pain of the bones. Theſe ſymptoms are often accompanied with buboes under the arm-pit, in the throat or groin; which ſometimes inflame and ſuppurate, at other times remain hard and indolent. Some patients feel pains in different parts of the body, which increaſe during the night-time, or when they take ſome violent exerciſe. This is the ſecond ſtage of the diſorder.

In

In the third ſtage, tetters, itching cruſts, or ulcers, appear coming and going in different parts of the body. The bones of the noſe, palatum, cranium, clavicula, tibia, arm, and hand, grow carious, or tophi appear in ſeveral of theſe bones. At laſt, pains of the breaſt, cough, loſs of appetite, ſight, hearing, ſmell, and falling off of the hair, cloſe the ſcene before death.—Sometimes all theſe ſymptoms appear at the very beginning of the diſeaſe.

The patients drag the diſeaſe now and then along for eighteen or nineteen years. One patient who had this diſorder twelve months upon him, beſides being affected with many ulcers and tophuſes, loſt at laſt, by the ſame, the calf of one of his legs.

There are ſome habits which ſeem not to be ſuſceptible of this diſeaſe, at leaſt they are capable of reſiſting the infection many years; but in general both ſexes, and all ages, are ſubject to it.

In the ſecond, and eſpecially in the third ſtage, the diſeaſe is highly infectious.

There are many inſtances where it has been for years in the conſtitution without giving any ſigns of its preſence.

A vulgar opinion prevails amongſt many, that it affects, like the ſmall-pox, but once the ſame perſon; but this has been found to be ill-grounded by ſeveral accurate obſervations.

THERE are ſome perſons with whom the diſeaſe proved fatal, by bringing on a mortification of the toes. Mr. *Bowman* obſerved two caſes; one where a little boy loſt, by the diſeaſe, both feet, the ſtumps remaining; and another where the leg fell off by the knee. Both patients recovered.

AFTER ſome days uſe of medicines, the ſymptoms often grow worſe, but afterwards diſappear.

THE bed-clothes, as well as other clothes and linen, are to be well waſhed in ſoap-ley, before they are again made uſe of.

COITUS is very infecting, and ought to be avoided during the cure.

CHILDREN form a large proportion of the infected. There are examples where Mr. *Bowman* ſaw the conſtitution of ſome children get the better of the diſeaſe without any medicine; as is evident from the inſtance of J. Simar, now nineteen years of age, who had the diſeaſe when one year old, and never took any medicines for it, nor was ſuckled by his mother when ſhe took medicines. Some children ſeemed to be cured of the diſeaſe by the medicines which the mother, infected, had taken formerly, though ſhe herſelf was not perfectly cured by them.

THERE is hardly any application that ignorance or ſuperſtition, influenced by neceſſity, could ſuggeſt, which had not been made uſe of by the Canadians for the cure of this diſeaſe.

THE

THE dock and burdock roots, ſarſaparilla, and ſpruce, have been generally made uſe of, and with ſome appearance of ſucceſs. Moſt ſucceſs, however, has been obſerved from a decoction of the bark of the branches of the hemlock-ſpruce (a tree ſo called on account of the reſemblance of its ſmell with hemlock;) and Mr. *Bowman* obſerved afterwards, that it greatly forwarded the cure, though none was found to be cured radically without mercury. The ſame bark he found anſwer very well, inſtead of the Peruvian bark for ſtrengthening the conſtitution. Children were cured by ſucking the mother, to whom mercury was adminiſtered.

PURIFIED mercury, ſimply divided and joined with anodynes, ſeemed to anſwer beſt.

SUBLIMATE and ſarſaparilla were greatly praiſed, but have not anſwered in the advanced ſtages of the diſeaſe.—In adults, however, the ſolution of corroſive ſublimate with the decoction of the bark of hemlock-ſpruce, had very good effects.

MR. BOWMAN, to whom we owe the beſt account of this diſeaſe, found it neceſſary to continue the mercury three weeks after all ſymptoms diſappeared. He obſerved, that thoſe patients who made uſe of the milk diet during the cure, were ſooneſt re-eſtabliſhed. He cured many of the worſt caſes.

GOVERNMENT, by the humane repreſentation from Governor *Hamilton*, thought proper to appoint and ſend out in 1786, ſix ſurgeons, to cure and adminiſter

ter medicines *gratis* to every perſon afflicted with this new diſorder; in order to eradicate, or at leaſt mitigate, this evil, with which whole families were infected.

The moſt remarkable in this new diſeaſe is, 1. That it ſeldom affects the genitals; and, 2*dly*, That it is contagious, or at leaſt communicated without immediate contact or coition.

These two curious circumſtances appear to me highly intereſting, becauſe they ſeem to elucidate ſeveral paſſages of the earlieſt writers on the lues; who all agree, that the diſeaſe, when it firſt appeared, and a good while after, has been propagated without immediate contact or coition; and in none of the authors who wrote the firſt twenty years after the venereal diſeaſe appeared, I find any mention made of the genitals being affected.

The diſeaſe called the *Sibbens*, which, ſeveral years ago, was very general, eſpecially in Galloway and Ayrſhire, but has now become much leſs common, is, on account of its mode of propagation, as well as on account of its ſymptoms and cure, ſo very ſimilar to this new diſeaſe of Canada, that I think it is to be referred to this head.

CHAP.

CHAP. XIII.

On MERCURIAL PREPARATIONS *in general.*

BEFORE I enter into the consideration of the different mercurial preparations, the reader will perhaps be pleased to see a synoptical view of all the preparations of mercury hitherto known. I therefore subjoin the following Table.

TABLE

Of all the different MERCURIAL PREPARATIONS hitherto known †.

I. PREPARATIONS where the Mercury is simply purified.

* Hydrargyrum purificatum.

Syn. Mercurius crudus purificatus *officinarum.*
Argentum vivum purificatum. *Pharm. London.*
Anglis, Quickfilver, rude purified mercury; *Germanis*, Reines queckfilber; *Gallis*, Mercure pure.

II. PREPARATIONS in which the Mercury is only divided.

By

† Those marked *, are most in use.

1. By gums or mucilages; ſuch as gum-arabic, tragacanth, &c.

* Hydrargyrum gummoſum.
Mercurius gummoſus of *Plenck* (the inventor.)

2. By reſins or balſams; ſuch as turpentine, balſamum copaiva, &c.

* Hydrargyrum terebinthinatum, &c.

3. By ſuet or vegetable oils; ſuch as hog's-lard, gooſe-fat, or butter of cocoa nuts.

* Hydrargyrum unguinoſum.
* Unguentum hydrargyri.

4. By calcareous earth; ſuch as chalk, chelæ cancrorum, &c.
Mercurius alkaliſatus.

III. PREPARATIONS where the Mercury is calcined by heat and air.

* Hydrargyrum calcinatum.
Syn. Mercurius calcinatus.
Mercurius præcipitatus per ſe.

IV. PREPARATIONS where the Mercury is partly divided and partly diſſolved.

1. By ſugar-candy, or ſaccharine compoſitions; ſuch as conſerva roſarum, cynoſbati, &c.

* Saccharum hydrargyratum.

2. By honey.

* Mel hydrargyratum.

3. Mercury

3. Mercury combined with ſulphur, (flowers of brimſtone).

* Hydrargyrum ſulphuratum.
a. By ſimple trituration or fuſion.
* Hydrargyrum ſulphuratum nigrum.
Syn. Æthiops mineralis.
b. By ſublimation.
* Hydrargyrum ſulphuratum rubrum.
Syn. Cinnabaris factitia, ſeu artificialis.

4. Mercury combined with ſulphur of antimony.

a. By ſimple trituration.
* Sulphur antimonii hydrargyratum nigrum.
Syn. Æthiops antimonialis.
b. By ſublimation.
* Sulphur antimonii hydrargyratum rubrum.
Syn. Cinnabaris antimonii.

5. Mercury combined with ſulphur by precipitation.

See below the *Preparations with the Vitriolic acid.*

V. PREPARATIONS where the mercury is reduced to the form of a metallic ſalt or calx, by acids; Such as,

1. Acid of ſuet. 2. Acid of common ſalt. 3. Acid of ſugar. 4. Acid of amber. 5. Acid of arſenic. 6. Acid of wood-ſorrel. 7. Acid of phoſphorus. 8. Acid of vitriol. 9. Acid of ſugar of milk. 10. Acid of tartar. 11. Acid of citron or lemon. 12. Acid of nitre. 13. Acid of fluor mineral. 14. Acid of vinegar. 15. Acid of borax. 16. Acid of Berlin blue. 17. Acid of molybdæna. 18. Acid of tungſtone. 19. Aërial acid.

1. Mercury combined with acid of ſuet (acidum ſebi.)

Hydrargyrum ſebinum.

2. Mercury combined with the muriatic acid; or acid of common ſalt.

* a. Hydrargyrum muriatum.

* Hydrargyrum muriatum fortius { By ſublimation, or By precipitation.

Syn. Mercurius ſublimatus corroſivus.
Mercurius ſublimatus albus.
Mercurius corroſivus albus.

* Hydrargyrum muriatum mitius { By ſublimation, or By precipitation.

Syn. Mercurius dulcis.
Mercurius dulcis ſublimatus.
Calomel ſeu calomelas.
Aquila alba.
Panacea mercurialis.
Mercurius dulcis lunaris of *Schroeder*.
Mercurius dulcis precipitatus of *Scheele* (the inventor), or calx hydrargyri muriata.

Preparations of muriated quick-ſilver by means of different precipitations.

a. From its ſolution in muriatic acid by vegetable alkali.
Mercurius præcipitatus albus.

b. From its ſolution in muriatic acid by mineral alkali.
Mercurius præcipitatus albus.

c. From its ſolution in muriatic acid by volatile alkali.
Mercurius præcipitatus albus.

d. From its ſolution in muriatic acid by copper.
Mercurius præcipitatus viridis.

e. Dr. *Ward*'s *white drop*, or mercury precipitated from its ſolution in nitrous acid, and re-diſſolved by ſal ammoniac.

3. With the acid of ſugar.
Hydrargyrum ſaccharatum. *Bergman.*

4 With the ſuccinous acid; or acid of amber.
Hydrargyrum ſuccinatum. *Bergman.*

5. With the acid of arſenic.
Hydrargyrum arſenicatum.

6. With

6. With the acid of wood-ſorrel, (oxalis acetoſella Linnæi.)

Hydrargyrum oxalinum. *Bergman.*

7. With the phoſphoric acid.

Hydrargyrum phoſphoratum. *Bergman.*
By precipitation from its ſolution in the nitrous acid by recent urine.
Roſa mineralis.

8. With the vitriolic acid.

* a. Hydrargyrum vitriolatum.
Syn. Vitriolum mercurii.
Oleum mercurii.
* b. Hydrargyrum vitriolatum flavum.
Syn. Turpethum minerale.
Mercurius emeticus flavus.
Mercurius flavus.
Mercurius præcipitatus luteus.
Turpethum nigrum.
* c. Mercury precipitated from its ſolution in nitrous acid by hepar ſulphuris or hepar calcis.
Mercurius præcipitatus niger.

9. With the acid of ſugar of milk.

10. With the acid of tartar.

a. Hydrargyrum tartariſatum. *Bergman.*
b. With purified tartar, commonly called *cream of tartar*, viz. *veg. alkali ſuperſaturated with the acid of tartar.*
* Tartarus Hydrargyratus.
Terre feuilletée mercurielle of Dr. *Preſſavin*, (the inventor.)
c. Mercury precipitated from its ſolution in nitrous acid by the acid of tartar.
* Calx Hydrargyri tartariſata flava; vulgo, Pulvis Conſtantinus.
d. Mercury precipitated from its ſolution in muriatic and tartarous acid by fixed vegetable alkali.
* Calx hydrargyri tartariſata alba; vulgo, Pulvis argenteus.

11. With the acid of citron; or lemon.

Hydrargyrum citratum. *Bergman.*

12. With the acid of nitre.

* Hydrargyrum nitratum.

A. Simply diſſolved.

* Acidum nitri hydrargyratum.

Syn. Solutio mercurii.

B. Evaporated and calcined by fire.

* Calx hydrargyri nitrati rubra.

Syn. Mercurius corroſivus ruber.
Mercurius præcipitatus ruber.
Pulvis principis.
Mercurius corallinus.
Mercurius tricolor.
Panacea mercurii.
Arcanum corallinum.
Panacea mercurii rubra.

C. Precipitated from its ſolution in nitrous acid.

a. By volatile alkali.

* Hydrargyrum nitratum cinereum.

Syn. Pulvis mercurii cinereus. *Pharm. Edin.*
Turpethum album.
Mercurius præcipitatus dulcis.

b. By vinous volatile alkali, (ſpiritus ſalis ammoniaci vinoſus.)

Turpethum nigrum.
Mercurius præcipitatus niger.

c. By fixt vegetable alkali.

Mercurius præcipitatus fuſcus. *Wurtz.*

d. By copper.

Mercurius præcipitatus viridis.

13. With the acid of fluor or ſpar, (fluor mineralis.)

Hydrargyrum fluoratum. *Bergman.*

14. With the acid of vinegar.

Hydrargyrum acetatum. *Bergman.*

15. With the acid of borax.

Hydrargyrum boraxatum. *Bergman.*

16. With

16. With the acid of Berlin blue.

17. With the acid of Molybdæna.

18. With the acid of Tungſtone.

19. With the aërial acid, or fixt air.
Hydrargyrum aëratum. *Bergman.*

A NUMBER of the different mercurial preparations mentioned in the foregoing table, have been recommended at different times, by different chemiſts and practitioners, for curing the venereal diſeaſe. We ſhall confine ourſelves to the conſideration of thoſe marked with an aſteriſk, and principally employed now, having either maintained their reputation from their firſt introduction into practice, or having been diſcovered in our times, and poſſeſſing ſuch qualities as will intitle them to the ſame predicament.

THEY are ſhortly as follow:—

MERCURY in its crude ſtate rubbed down, or, as it is commonly called, *extinguiſhed* or *killed*, with fat or oils, with gum-arabic, turpentine, extract of liquorice or conſerve of roſes, &c.—In a more diſſolved ſtate triturated with ſugar candy, a preparation which I called *ſaccharum hydrargyratum*.—United with ſulphur under the name of *cinnabar*, for fumigations.—The metal calcined by itſelf, and thence called *hydrargyrum calcinatum*.

MERCURY diſſolved by different acids, and united with them into a metallic ſalt, or precipitated from them in the form of a more or leſs acrid calx. Such as,

WITH

With the muriatic acid: The corroſive ſublimate, which I gave in the table the more adequate name of *hydrargyrum muriatum fortius*, in order to diſtinguiſh it as well from calomel or mercurius dulcis, which I called *hydrargyrum muriatum mitius;* as from the mercurius dulcis prepared by precipitation, according to the invention of Mr. Scheele, which may be called with propriety *calx hydrargyri muriata Scheelli*, or *hydrargyrum muriatum mitius præcipitatum.*

With the acid of vitriol: The turpeth mineral, mercurius emeticus, or præcipitatus flavus, called more properly *hydrargyrum vitriolatum.*

With the acid of tartar: The *hydrargyrum tartariſatum*, which ought to be diſtinguiſhed from what I call the *Tartarus hydrargyratus*, or *terre feuilletée mercurielle* of Dr. Preſſavin of Paris; which latter is a combination of mercury with purified tartar (commonly called *cream of tartar;*) whereas the former is a compound metallic ſalt made of mercury and the pure acid of tartar.

With the acid of nitre: The *hydrargyrum nitratum*, either in a liquid ſimple ſolution, which I called *acidum nitri hydrargyratum*, or in a more ſolid or compound form, as in the *hydrargyrum nitratum rubrum*, commonly, though very improperly called *red precipitate;* or in the *ſyrup of Bellet.* The *pulvis mercurii cinereus* of the New Edinburgh Pharmacopœia; where the mercury diſſolved in nitrous acid is precipitated by volatile alkali; however not quite deprived of the acid, and therefore more properly called *hydrargyrum*

rum nitratum cinereum. Dr. Ward's white drop, where the mercury diſſolved in the ſame acid is precipitated and re-diſſolved by means of ſal ammoniac, belongs rather to the preparations of mercury made by means of the muriatic acid. And laſtly,

With the acid of vinegar: *Hydrargyrum acetatum*, known under the name of *Keyſer's pills*, or *troches*; where the mercury, after having undergone a long-continued trituration, is thereby united with this acid.

All theſe different preparations are applied in various forms; ſuch as powders, pills, boluſes, ſolutions, lotions, injections, ointments, &c. ſome of them for external, others for internal uſe; for which, I muſt refer the reader to the *Pharmacopœia Syphilitica* annexed at the end of this Treatiſe. In general, it is to be obſerved, that all dry mercurial preparations are the ſafer and better the finer they are levigated.

CHAP.

CHAP. XIV.

On MERCURIAL PREPARATIONS *in particular.*

I. *On* CRUDE MERCURY, *the* MERCURIAL OINTMENT, *and on* MERCURIAL FRICTIONS.

OF all the different methods hitherto diſcovered for curing the venereal diſeaſe, that by mercurial frictions is perhaps the moſt efficacious, as well as the ſafeſt and mildeſt. The application of mercury in this way, however, as indeed the uſe of mercurials in general, requires often conſiderable ſkill and attention on the part of the practitioner, as well as a very ſtrict compliance and obſervation of regimen on that of the patient, in order to produce the deſired effect in the ſpeedieſt manner.

SUCH is the difference of conſtitutions, that ſome perſons will be more affected by a few frictions than others, ſeemingly in the very ſame circumſtances, by twenty or thirty: and if more mercury is rubbed in, with a view to increaſe its effect, inſtead of benefiting the patient, we often run the riſk of bringing on very diſagreeable ſymptoms; ſuch as vertigo, feveriſh heat, ſalivation, trembling of the extremities, or chronic violent pains in the articulations.

WHEN frictions have their proper effect, the uſe of them is not attended with any bad ſymptom; the patient

patient is eaſily cured without ſuffering much in the time, or without finding himſelf much weakend afterwards. Moſt people have their ſymptoms in ſome meaſure relieved by four or ſix frictions; though ſometimes fourteen or fifteen are required to produce this effect.

THE mercury employed for this purpoſe ought to be very pure; and as practitioners cannot be aſſured of the purity of that which is ſold in the ſhops, they ought to purify it themſelves. Moſt of our mercury comes from Idria, and paſſes through the hands of the Dutch, by whom it is, not unfrequently, adulterated with heterogeneous ſubſtances, without any diminution of its fluidity or metallic ſplendor. But no phyſician who has the ſafety of his patients at heart, ought ever to employ quickſilver, either externally or internally, without being certain of its being perfectly pure; for, by making uſe of the metal in an impure ſtate, he may not only be diſappointed in the effects he expected, but may do a real harm to the patient. This being the caſe, the reader, I hope, will excuſe the following remarks upon the Adulteration and Purification of Mercury.

QUICKSILVER is found in mines, either native, in which ſtate it is called *mercurius virgineus*; or mineralized, when it obtains the name of ore, from which it is afterwards ſeparated by diſtillation.

THE ores of mercury are of different kinds and forms. The native cinnabar, however, is the kind which generally contains the greateſt quantity of

quickſilver. But though many recommend the native cinnabar as a remedy to be employed in practice, it is a matter of fact, that it is often mixed with arſenic or other heterogeneous particles. It is, therefore, running a riſk to employ native cinnabar, eſpecially for internal uſe; and though it is ſometimes more beautiful in its colour than the artificial, we may always depend with more ſafety upon the latter, if properly prepared.

The mercury being in the cinnabar, or other ores of mercury, generally mineralized by ſulphur, or at leaſt concealed under it, the proceſs to ſeparate it from the ſulphur conſiſts herein, that a ſubſtance be united with mercurial ores which has a greater affinity with the ſulphur than with the mercury: Such ſubſtances, for example, are alkaline ſalts, calcareous earth, iron, ſcoria ferri, &c. If, therefore, one or other of the juſt-mentioned ſubſtances (of which, however, the cheapeſt is generally choſen) be mixed with the ore of mercury, and expoſed to diſtillation, this ſubſtance will unite with the ſulphur, and the quickſilver, being thereby ſet at liberty, will go over into the receiver in its liquid metallic ſtate, in the form of vapours.

A bad cuſtom has, alas! ariſen from intereſted motives, viz. to adulterate mercury with lead, with which it readily unites. This adulteration is accompliſhed the more eaſily by the medium of ſome biſmuth; becauſe the amalgam thus produced is much more fluid, and retains much better the metallic ſilvery ſplendor of mercury. It is thence evident,

evident, that the colour and ſplendor of quickſilver are not always certain characteriſtics of its purity; and the purification of mercury, by preſſing it through a leather bag, is by no means to be depended upon; becauſe the amalgam made of quickſilver, lead, and biſmuth, is often ſo perfect, that though even the fourth part of the whole maſs conſiſts of lead and biſmuth, very little, however, of theſe heterogeneous ſubſtances will remain behind in the leather bag.

The only ſure means, therefore, to purify quickſilver is diſtillation. For which purpoſe, ſome think iron veſſels are beſt fitted, iron being the only metal with which the mercury refuſes to unite, and there being no fear that iron veſſels are deſtroyed by the proceſs, as there is with regard to thoſe made of glaſs. To make uſe of iron veſſels is the more adviſable, becauſe the mercury expands very much during the operation, by which means glaſs-veſſels are eaſily broken. The higher the mercury is driven before it deſcends again, the better it is, becauſe by theſe means the particles of lead cannot ſo eaſily be carried with it. The veſſel for this operation may be an iron pot, with a long iron neck like the barrel of a muſket. But in order to condenſe the better and eaſier the mercury riſing in the form of vapours, the end of that tube, bended downwards, ſhould be one or two inches deep immerſed in vinegar. All the mercury is, by this method, not only obtained without loſs, and the operator is expoſed to no danger, but the mercury will alſo be perfectly freed and purified from all particles of lead and biſmuth which

might poſſibly have gone over with it, they being ſoluble, and the quickſilver inſoluble, in vinegar.

The characters of pure quickſilver are, 1. That, when poured upon wood, it forms globules, which always retain a ſpherical form, and never are drawn into length, forming a line like a thread. 2. That its ſurface is not covered with a cuticle, but ſhining. 3. That when rubbed with water, the water grows thereby not blackiſh or foul. 4. That vinegar rubbed or digeſted with it, does not acquire from it a ſweet taſte. 5. That put in an iron ſpoon over the fire, it evaporates entirely, without leaving any thing behind.

The *mercurial ointment* is generally prepared by rubbing, or, as it is commonly called, *killing*, or extinguiſhing the mercury with hog's-lard and turpentine. The preparation of the ointment in this manner is very exceptionable. It generally ſoon produces in many perſons, whoſe ſkin is tender, puſtules of an inflammatory kind, very painful, which prevent the continuation of the frictions.—A more proper method therefore of preparing the mercurial ointment for this purpoſe, is, by triturating the purified metal with freſh hog's-lard, repeatedly waſhed and cleaned previouſly for ſeveral days with pure water, without the addition of any turpentine. The trituration ought to be continued for two hours, even after all the globules of mercury have diſappeared, in order to be certain of the moſt perfect diviſion. It ſhould then be put by in a cold place, not only to avoid its growing rancid, but alſo to prevent its melting,

ing, which would produce a ſeparation and ſubſequent precipitation of the metal from the hog's-lard to the bottom of the veſſel.

But, notwithſtanding this precaution, we often meet with patients whoſe ſkin ſeems to be ſo extremely irritable, that they cannot bear the application of the ointment, even when prepared according to the method juſt mentioned. The great propenſity of the hog's-lard to grow rancid, eſpecially in hot ſeaſons or warm climates, contributes greatly to occaſion this troubleſome effect. In ſuch circumſtances, it will be proper either to mix with the above ointment a ſmall quantity of the ointment of liquorice recently prepared, or to prepare it entirely of mercury and the butyraceous oil obtained from cocoa-nuts by boiling them in water; or to make uſe, inſtead of the ointment, of quickſilver rubbed down with the mucilage of gum-arabic. Thus, indeed, the proceſs is rendered perhaps a little more troubleſome and expenſive; but the practitioner who wiſhes to render the cure eaſy and agreeable to his patient, will readily ſubmit to inconveniences of this kind.

By this method we may effectually prevent the pruritus or puſtules proceeding from the application of the common mercurial ointment, eſpecially if, at the ſame time, the place where the ointment is to be rubbed in, be previouſly ſhaved, and too harſh rubbing with the hand be avoided. For ſuch puſtules ſometimes ſeem to originate from the hair being

ing violently moved in oppoſite directions, which, by theſe means, will be eaſily avoided.

The principal objects, after the application of mercurial frictions has been fixed upon, ought to be, *1ſt*, To diſpoſe the place, which the ointment is to be rubbed in, to the ready abſorption of the mercury; and, *2dly*, At the ſame time, to diſpoſe the ſurface of the body to tranſmit the metal as ſpeedily as poſſible through its pores, after it has produced the deſired effects in the ſyſtem; and thus to prevent ſalivating, purging, or its ſettling in the bones or any of the cavities of the body. For this purpoſe, it will be always adviſable to preſcribe, before we begin the frictions, a purgative, and to order the patient to ſit in a warm bath made with ſoft water, and of about 86 degrees of Fahrenheit's thermometer, for the ſpace of half an hour, or an hour. After he has been in it for a quarter of an hour, he muſt be rubbed all over with a fleſh-bruſh, or a piece of flannel and ſoap, to clean the ſkin and adapt it the better to the purpoſes above mentioned. This is to be done, if no particular circumſtance forbids, the day before, or the very day when we begin the frictions; and to be repeated once or twice a-week afterwards during the whole courſe of the frictions.

The ſame evening, or the day after, having made uſe of the warm bath, the patient ſhould begin the friction, rubbing into the outſide or inſide of his thigh or leg, before he goes to bed, a drachm of the mercurial ointment prepared as above directed. The friction is to be performed by the fire-ſide in winter, and

and the rubbing ought to be made gently, and continued for half an hour or an hour, till the whole be rubbed in. The part is then to be covered with a piece of linen faſtened with a bandage; or the patient is to put on a pair of drawers, or a pair of ſtockings if the friction has been made on the leg. The ſame bandage, &c. may ſerve for the whole time, or at leaſt for ſeveral days, being applied only to keep the ſhirts and bed-linen from being ſullied and growing black from the ointment.—Before each new operation, the greaſe and blackneſs ought to be well cleanſed or waſhed off with ſoap and warm water.

The friction itſelf is beſt made by the patient with his own hand; but to fat people, or to the female ſex, this operation may prove tireſome: in which caſe a ſervant ſhould be inſtructed how to do it, putting on a glove made of a ſoft hog's bladder or oil-ſkin. I would not adviſe any perſon to perform this operation for another without putting on ſuch a glove, becauſe I have ſeen inſtances of a ſalivation being brought on in the aſſiſtant, from rubbing in the mercurial ointment with his naked hand. Beſides, we cannot be certain how much ointment is rubbed into the patient, when part of it is abſorbed into the ſervant's hand.

After the firſt friction, we are to obſerve attentively whether the mercury occaſions any irregular motion in the body: if it does ſo, it ought to be omitted for two days, and the patient to obſerve the ſame regimen, to be well cloathed, and to keep within doors, eſpecially in a cold ſeaſon.

If, after two days, the patient ſhould perceive no diſagreeable ſymptoms, the ſecond friction is to be made in the ſame manner as the firſt. The next day he muſt leave it off again; and if he then finds no ill effects, the frictions ought to be continued hereafter every day, either morning or evening, without intermiſſion, unleſs ſome accident intervene. The place of rubbing, however, muſt be changed every day, or every other day, in order to avoid irritating the ſkin, and puſtules riſing upon it. If, after five or ſix frictions, we find that the patient has no fever, diarrhœa, ſalivation, or immoderate ſweating, and that he will thus bear the mercury, we may rub in two drachms of the ointment at every friction, eſpecially if the ſymptoms be obſtinate.

In this ſituation, if the weather be warm, or indeed unleſs it be ſeverely cold and damp, the patient may go out every day during the frictions, provided he be warmly cloathed, and avoid the cold wind, and eſpecially the night air. But he ought carefully to guard againſt checking perſpiration; and, therefore, if the weather be cold, windy, or moiſt, he ſhould rather keep at home in a moderate warm room, and ſhun as much as poſſible every inconvenience from cold. In a ſevere ſeaſon he ſhould conſtantly wear flannel ſtockings and a flannel waiſtcoat, according to circumſtances, either over or under the ſhirt.

During all this time, however, he ſhould, if poſſible, uſe the warm bath, as already directed, once or twice a-week; proceeding in this manner until his health

health be perfectly re-eſtabliſhed: which will be after thirty or thirty-five frictions, if the ſoft parts only have been affected; but if the diſeaſe has been confirmed, or of a long ſtanding, ſo that the bones are affected, fifty, ſixty, or ſeventy frictions will be abſolutely neceſſary to procure a perfect and radical cure; though this, no doubt, will vary according to the conſtitution of the patient.

It muſt here be remarked, as an obſervation of great conſequence both to the phyſician and patient, that the ceſſation of the ſymptoms is never to be looked upon as a ſign of a radical cure. This we ought to tell our patients in the beginning, eſpecially to thoſe of the female ſex, that to alleviate the pain or abate the ſymptoms of the diſorder, and to deſtroy and eradicate the venereal poiſon from the body, are two things widely different. The former may often be accompliſhed in three or four days, by a very few frictions; whereas the letter will ſometimes require as many months. The ſame thing will undoubtedly happen in this reſpect when we leave off the frictions as ſoon as the ſymptoms diſappear, as when we leave off the Peruvian bark in agues, as ſoon as the fever is gone: the fever ſoon returns again, although perhaps with a different type; but by continuing the bark a little longer, we are ſure of rendering the cure perfect, and need not to be in the leaſt afraid of a relapſe.

We muſt, therefore, for the ſafety of our patients, continue the uſe of mercury for two or three weeks, or at leaſt ten days, after the ſyphilitic ſymptoms

have perfectly diſappeared; but it is here where the practitioner muſt give proof of his judgment and experience.

When the patient, during the frictions, or any other courſe of mercury, feels his gums begin to ſwell, his breath to ſmell diſagreeably, his throat to become painful in the inſide, or when he is obliged to ſpit oftener than uſual, the uſe of mercury is immediately to be left off till theſe ſymptoms diſappear, and then he may go on with it again. But, in general, I think it eligible to go on with the frictions, if the patient can otherwiſe bear them, pretty briſkly, until the mouth be a little affected; becauſe thus we are certain that the frictions have had their proper effect, and that the mercury has been abſorbed into the ſyſtem.

The generality of patients, as has been already mentioned, find ſome relief after a few frictions; but there are ſome, eſpecially thoſe who have the bones affected with tophus, caries, &c. who feel no remiſſion of the ſymptoms till after fifteen or twenty frictions; and ſometimes, in this ſtate of the diſeaſe, ſeventeen ounces of mercurial ointment will be requiſite to produce a perfect cure.

In all ſuch caſes, we muſt endeavour to make the mercury go off by perſpiration; but profuſe ſweating ought, on the other ſide, not to be encouraged, leſt it ſhould weaken the patient, or bring on a conſumption, eſpecially in ſuch as are cachetict, or of a thin habit of body. Where we find the body naturally diſpoſed

diſpoſed to ſalivation, we ought to be very cautious how we proceed. In this caſe the patient ſhould, eſpecially in bad weather, keep carefully within doors, in a room moderately warm, without being too much covered, particularly on his head or neck. The proper temperature of the room in winter is to be betwixt 70 and 75 degrees of Fahrenheit's thermometer. But in fine dry weather, I would rather adviſe him to go abroad; for I have found, in many inſtances, that the enjoying of pure free air contributes rather to prevent a ſavilation. In warm ſeaſons or climates ſuch precautions are unneceſſary. If the patient be weak, the Peruvian bark may be given, at the ſame time, with advantage, from a ſcruple to a drachm, in milk or wine according to circumſtances, every morning and evening.

By this method, I have generally ſucceeded in preventing the above mentioned bad effects of the mercury, as profuſe ſweats, ſalivation, and its running off by ſtool: in all theſe caſes, the mercury, though abſorbed in the two former caſes into the ſyſtem, ſeems to run off by the ſalivary glands as faſt as it is taken, without performing thoſe ſalutary effects in the body, which are abſolutely neceſſary to deſtroy the venereal poiſon, and to produce a radical cure. In the latter caſe, when a diarrhœa is occaſioned by the mercury given internally, its abſorption from the inteſtines into the maſs is thereby prevented, and it can have little or no effect againſt the diſeaſe. I have ſeen ſeveral venereal patients treated in this manner, who, after taking mercury for ſix or eight weeks, which kept them all that time in a continual

diarrhœa, were, with regard to their original diſeaſe, nearly in the ſame ſtate at the end of this courſe, as they had been at the beginning of it.

II. *On* Mercurial Fumigations.

I have little to ſay on this ſubject. *Mercurial Fumigations*, though now a-days no more in uſe for curing the lues, prove often a moſt effectual remedy for curing local venereal complaints. The artificial cinnabar is for this purpoſe to be put upon live coals, and the riſing ſmoak to be conveyed, by means of a proper funnel, to the part affected.

III. *Of* Saline *and other* Mercurial Preparations.

The *hydrargyrum gummoſum*, (or mercurius gummoſus), is a mild mercurial preparation, in which the crude metal is divided by means of gum-arabic. Mr. Plenck, the inventor of this preparation, firſt preſcribed it diluted with water, in the form of a mixture; but this form being found inconvenient on account of the mercury not remaining properly ſuſpended, he propoſed, ſometime ago, to form it into pills. He, for this purpoſe, orders two drachms of well purified quickſilver to be triturated with three drachms of powdered gum-arabic, and a ſufficient quantity of conſerve of hips, in a marble mortar, till the mercury has diſappeared; then continuing the trituration for an hour longer, the maſs to be mixed with half an ounce of crumb of white bread, and ſo to be formed into pills of three grains each, of which the patient is to take ſix every morning and evening.

This

This form is undoubtedly leſs exceptionable, but ſtill liable to another inconvenience; which is, that theſe pills, like all thoſe made with crumb of bread, when kept for a length of time, grow ſo hard, that they frequently paſs the ſtomach undiſſolved, and are evacuated by ſtool in the ſame globular form they were taken. This objection, indeed, cannot be made, if they are prepared freſh every ſecond or third day; and, in that caſe, they will be found a very valuable acquiſition for our Pharmacopœia Syphilitica.—A bolus made from five to ten grains of quickſilver, with a ſufficient quantity of the conſerve of roſes, or confectio cardiaca, or, what is more preferable, with the extract of liquorice, will, according to circumſtances, ſerve for the ſame purpoſe.

Mercury divided by means of ſome balſam, would be a very acceptable and uſeful medicine in different caſes. An attempt of the kind has been made in the pilulæ ex hydrargyro terebinthinato, where one ounce of quickſilver is united with a drachm and a half of turpentine; but beſides that the diviſion is extremely tedious, which indeed may be obviated by adding ſome drops of the oil of turpentine, this compoſition is, like all the ſaline mercurial preparations, very apt to excite griping and purging. This effect may be partly owing to the quality of turpentine; the beſt ſort ſhould therefore be choſen for this purpoſe, and, according to circumſtances, inſtead of the turpentine, the balſam of Gilead, or balſamum Canadenſe, formed into a proper conſiſtence by means of the ſpecies aromaticæ, or ſome other vegetable powder, might

might be tried; and thus a pill or bolus of five or ſeven grains be given every evening.

The *ſaccharum hydrargyratum*, or quickſilver triturated with twice or three times its weight of ſugar-candy, is, in many inſtances, a moſt excellent medicine, as well for internal as external uſe. Its doſe internally is from four to eight grains a-day, in the form of powders, pills, or troches.

The *hydrargyrum calcinatum*, or calcined mercury, I have conſtantly found to be apt to excite gripings. This may, in ſome reſpect, be avoided, by mixing half a grain of it with a grain of opium, to be taken every night, or every ſecond night, in the form of a pill.

The *hydrargyrum acetatum*, known by the name of Keyſer's pills or troches, has of late made a great noiſe in France. It has been recommended as the ſafeſt and beſt medicine for curing venereal complaints, even of the moſt obſtinate and inveterate kind, without ever occaſioning a ſalivation, or producing any of thoſe bad ſymptoms which ſometimes attend the uſe of other mercurials. Time and experience, however, have ſhown that this remedy ſometimes proves ineffectual in removing the complaints, and in many inſtances produces the bad ſymtoms attending other mercurials. Mercury, indeed, as long as it retains its nature, certainly will ſalivate or purge, if given imprudently, or if the patients do not take proper care of themſelves. Beſides, among a variety of patients, ſome will certainly be met with, where

where this medicine proves not ſo efficacious as has been pretended. For every phyſician who has had ſome practice in venereal complaints, muſt have met with caſes where one mercurial preparation has produced little or no effect, whilſt another, tried afterwards, ſucceeded beyond expectation. Theſe caſes we are not able to account for; nor do we as yet know the nature of the human body ſufficiently to foreſee them *à priori*. Keyſer's pills are a ſaline mercurial preparation, where the mercury is firſt divided by a long continued trituration, and then diſſolved in vinegar. Hence, like all other mercurial preparations, it may ſometimes produce very good effects, and perfectly cure the diſeaſe; whilſt, in other inſtances, it may prove leſs uſeful or even hurtful. And this is probably the reaſon why this preparation is now moſtly neglected, though there have been ſince two methods diſcovered to prepare it eaſier, cheaper, and better, by precipitation.

The *hydragyrum tartariſatum*, we call a combination of mercury with ſimple acid of tartar, in order to diſtinguiſh it from the *tartarus hydrargyratus*, an invention of Dr. Preſſavin at Paris, who gave it the name of *terre feuilletée mercurielle*. This latter preparation being a combination of mercury with purified tartar, or cream of tartar, which is a middle ſalt compound of vegetable alkali, ſuperſatured with the acid of tartar. Both theſe preparations are nearly of a ſimilar nature with the former, though perhaps, in ſome reſpects, preferable to it.

The *hydrargyrum nitratum*, or mercury united with nitrous

nitrous acid, has been employed in different forms and preparations internally and externally. For external uſe, the ſolution diluted with water has been made uſe of as a waſh, and is a very good medicine for ſhankers, &c. The ſame ſolution made with one ounce of quickſilver, to three ounces of nitrous acid, and while yet warm, united with a pound of hog's-lard by a careful trituration, yields, under the name of *unguentum citrinum*, one of the moſt efficacious remedies I know of for obſtinate ſyphilitic complaints of the ſkin. The red precipitate or *hydrargyrum nitratum rubrum*, prepared from the ſame ſolution, expoſed to fire till it acquires the colour mentioned, is of a corroſive nature, and therefore employed only in powder ſprinkled upon venereal ulcers as an eſcharotic. For internal uſe, the hydrargyrum nitratum has been commonly given, from half a grain to a grain, in a quart of any of the decoctions.—But the *hydrargyrum nitratum cinereum*, in the New Edinburgh Pharmacopœia, called by its inventor (Dr Black) *pulvis mercurii cinereus*, is one of the mildeſt of the ſaline mercurial preparations, and may be given to the doſe of a grain every evening, and occaſionally alſo every morning .—The following is the method of preparing it: Quickſilver, diluted acid of nitre, of each equal quantities in weight. After the mercury is diſſolved, the ſolution is to be diluted with pure water, and as much liquid volatile alkali (*ſpiritus ſalis ammoniaci*) to be dropped into it as is ſufficient for depriving the mercury of the acid: afterwards the grey powder is to be waſhed with pure water and dried.—The ſyrup of Bellet (commonly called *vegetable ſyrup*), a celebrated compoſition, the ingredients of which

are

are kept ſecret, is, as I was informed by a perſon of authority in France, mercury precipitated from its ſolution in the acid of nitre by fixed vegetable alkali, and the precipitate afterwards diſſolved in vitriolic ether mixed with ſome agreeable ſyrup.

I SHALL now take notice of a preparation of mercury, firſt recommended by the celebrated Baron Van Swieten. This preparation is the corroſive ſublimate *(mercurius ſublimatus corroſivus)*; or, as I would rather call it in the more accurate language of chemiſtry, the *hydrargyrum muriatum fortius*. Some years ago this medicine engaged the attention of all Europe. By ſome it was recommended as a moſt excellent and efficacious remedy for the moſt inveterate complaints, and worſt ſtages of the venereal diſeaſe. It was particularly praiſed againſt eruptions of the ſkin, and venereal affections of the bones; while others exclaimed againſt it as being frequently productive of the worſt effects in the ſyſtem, without hardly ever radically curing the diſtemper. Both parties ſeem to have gone too far in praiſing as well as blaming. I have ſeen caſes where this medicine perfectly cured the moſt inveterate and obſtinate complaints; while in others, I found it produced effects of the worſt conſequence; ſuch as a total derangement and pains in the ſtomach, griping, purging, head-ach, fever, anxiety, oppreſſion of the breaſt, and even ſpitting of blood, without curing, or even appearing to have the leaſt effect on the diſeaſe. But, in general, I have obſerved that this medicine very ſoon mitigates the moſt troubleſome ſymptoms of the venereal diſeaſe, without effecting a radical cure,

even after having been given for a very conſiderable time; and I am apt to think now, that its great reputation aroſe at firſt from this property, of frequently alleviating ſo ſpeedily and remarkably the moſt troubleſome venereal ſymptoms.

Upon the whole, though it is certain that there are ſome conſtitutions which will never bear this violent medicine without danger, yet, from ſuch obſervations as I have been able to make, it ſeems probable, that the bad effects attributed to the corroſive ſublimate have ſometimes ariſen, either from its improper preparation, from an immoderate doſe, from a delicate conſtitution of the patient, or otherwiſe from a defect of practical judgment in the phyſician or ſurgeon. Therefore, although I never like to employ violent medicines where I am able to effect a cure with mild ones; yet it muſt be allowed, that, in practice, caſes will ſometimes occur, attended with ſuch ſymptoms as require the uſe of the moſt powerful medicines, if for no other purpoſe but for a ſpeedy temporary relief. In theſe caſes, it will ſometimes be highly adviſable to have recourſe to the ſublimate; though it is probable to me, that ſuch caſes are much leſs frequent than it is commonly thought. But, at any rate, the conſtitution of the patient ought to be well conſidered before we have recourſe to this medicine. If he be of a ſtrong habit of body, and his lungs healthy, we may ſafely try the ſublimate, uſing the neceſſary precautions with regard to its doſe and manner of exhibition; but I would never recommend it where the patient is of a weak, delicate, and irritable habit of body, or if he has

has a ſmall cheſt, has had formerly an hæmoptyſis, or any pulmonary complaint; for theſe perſons I have always obſerved to ſuffer from the uſe of the ſublimate. Some indeed, who were apparently of a ſtrong conſtitution, I have ſeen equally affected by this remedy; for which reaſon I think it always neceſſary to be cautious in the uſe of it. We ought never to begin with more than a quarter, or at moſt half a grain a-day, diſſolved in milk, barley-water, or a decoction of ſarſaparilla. When given in this manner, if the patient is a proper ſubject for this medicine, it will not readily produce any bad, or at leaſt any dangerous conſequences; the leſs ſo when adminiſtered in a warm ſeaſon, or in a hot climate. In uſing the ſublimate, it ought beſides always to be remembered, that we can never be too careful with regard to its choice; and that with the utmoſt care and attention to the preparation of the ſublimate, it is hardly ever poſſible to obtain it always of the ſame degree of ſtrength, even by following the very ſame proceſs*. In all caſes therefore the patient ſhould be ordered to leave it off immediately whenever he felt any of the above mentioned bad ſymptoms. Sometimes it alſo occurs in the ſhops adulterated with arſenic, which may be diſcovered when mixed with

* All theſe inconveniences are now remedied by a recent diſcovery of my friend the ingenious Dr. BERTHOLET at Paris; who, by a new and eaſy way, obtains it always of the ſame ſtrength and quality, by adding dephlogiſticated muriatic acid to a ſolution of mercury in nitrous acid, and inſtantly cryſtals precipitate, which are compoſed of mercury and muriatic acid, and which I therefore gave in the table the name of *Hydrargyrum muriatum*, inſtead of the *præcipitatum* of Dr. *Bertholet*.

lime-water: in which caſe it will produce a black colour; whereas, if genuine, it yields with the ſame an orange-coloured precipitate, to which we gave the name *lotio ſyphilitica flava*, if one drachm of ſublimate is added to one pound of lime-water. Its texture beſides, if genuine, ought to be of a radiated appearance; whereas the ſame, if adulterated, has rather a granulated one.

THE *hydrargyrum muriatum mitius*, or perhaps ſtill more properly the *calx hydrargyri muriata*, commonly called *calomel*, *mercurius dulcis*, *mercurius ſublimatus dulcis*, *panacea mercurialis*, *aquila alba*, &c. is a milder preparation than corroſive ſublimate, but ſtill an acrid one, and thus very apt to produce gripings, and to run off by ſtool. Beſides, as its manner of acting depends very much on the accuracy of its preparation, and other circumſtances which we are not maſters of, its efficacy in curing the lues is not much to be depended upon. Indeed calomel is in different countries, in different ſhops in the ſame country, nay even in the ſame ſhops at different times, a very different medicine. On this account, though it cannot be denied that many have been cured of the venereal diſeaſe by this medicine, I never made uſe of it internally but for a mercurial purge, till of late, when Mr. *Scheele*, by a new method of preparing it *via humida*, has greatly removed all the objections this medicine was formerly liable to. As it will perhaps be agreeable to ſome of my readers to be more exactly acquainted with this proceſs, I ſhall ſubjoin it here.

"HALF

"HALF a pound of quickſilver, and the ſame quantity of pure aquafortis, are to be put into a ſmall veſſel with a long neck, the mouth of which is to be covered with paper. The veſſel is then to be placed in a warm ſand-bath; and after a few hours, when the acid affords no ſigns of its acting any longer on the quickſilver, the fire is to be increaſed to ſuch a degree that the ſolution may nearly boil. This heat is to be continued for three or four hours, taking care to move the veſſel from time to time; and at laſt the ſolution is to be ſuffered to boil gently for about a quarter of an hour. In the mean while we are to diſſolve four ounces and a half of fine common ſalt in ſix or eight pints of water. This ſolution is to be poured boiling into a glaſs-veſſel, in which the above mentioned ſolution of quickſilver is to be mixed with it gradually, and in a boiling ſtate alſo, taking care to keep the mixture in conſtant motion. When the precipitate is ſettled, the clear liquor is to be drained from it; after which it is to be repeatedly waſhed with hot water till it ceaſes to impart any taſte to the water. The precipitate obtained by this method is to be filtered, and afterwards dried by a gentle heat.

"IT might be ſuppoſed, that when the nitrous acid ceaſes to effervеſce with the mercury, it is ſaturated with it; but this is far from being the caſe; the acid, when the heat is increaſed, being ſtill able to diſſolve a conſiderable quantity of it; with this difference, however, that the quickſilver, at the beginning of the proceſs, is calcined by the acid, but afterwards is diſſolved by it in a metallic form. In proof of this we may obſerve, that not only more

elaſtic

elaſtic vapour ariſes, but alſo that by adding either fixed or volatile cauſtic alkali we obtain a black precipitate; whereas, when the ſolution contains only calcined quickſilver, the precipitate becomes yellow by ſuch an addition. If this black precipitate is gently diſtilled, it riſes in the form of quickſilver, leaving a yellow powder, which is in fact that part of the mercury that in the beginning of the operation was calcined by the nitrous acid.

" The boiling of the ſolution for about a quarter of an hour is neceſſary, in order to keep the *hydrargyrum nitratum* in a diſſolved ſtate, it being much diſpoſed to cryſtallize; in general, ſome of the mercury remains undiſſolved; but it is always better to take too much than too little of it, becauſe the more metallic ſubſtance the ſolution contains, the more mercurius dulcis will be obtained.

" It is neceſſary to pour the mercurial ſolution into the ſolution of ſalt by a little at a time, and cautiouſly, ſo that no part of the undiſſolved quickſilver may paſs along with it. Two ounces of common ſalt are ſufficient to precipitate all the mercury; but then it may eaſily happen, that ſome ſuperfluous mercurius corroſivus attaches itſelf to this precipitate, which the water alone is incapable of ſeparating completely. This is undoubtedly the reaſon why mercurius præcipitatus albus is always corroſive. I have found that common ſalt poſſeſſes the ſame quality as ſal ammoniac, viz. that of making the ſolution of corroſive ſublimate in water eaſy. I therefore employ

ploy four ounces and a half of common ſalt, in order to get the mercurius corroſivus entirely ſeparated.

" If we conſider the manner in which mercurius dulcis is obtained in the dry way, by ſublimation, we ſhall not find it difficult to give the rationale of this new proceſs.

" Mercurius corroſivus albus is a middle ſalt, conſiſting, as is well known, of marine acid combined with calx of mercury. This ſalt is capable of diſſolving a good deal of quickſilver in a metallic form; but for this purpoſe the moſt minute particles of each muſt be reciprocally mixed. This happens, when, by means of heat, they are both converted into vapour. The ſame thing occurs in the above-mentioned proceſs. The ſolution firſt ſpoken of contains the calx mercurii and quickſilver divided into the moſt minute particles. If to this ſolution we add marine acid, or (to ſave expence) common ſalt, the marine acid will unite with the calx of mercury, and the reſult of this union will be a true mercurius corroſivus albus; and as the ſolution contains quickſilver in its metallic ſtate, this will immediately attract as much of the mercurius corroſivus as is neceſſary to ſaturate it, and by this means a real mercurius dulcis will be produced, which, from its being inſoluble, will be immediately precipitated.

" The following facts are proofs that this precipitate is a good mercurius dulcis. *1ſt*, It is entirely taſteleſs. *2dly*, I have ſublimed it, and examined what aſcended in the beginning, and which ought to have

have been corroſive, if the precipitate had contained any thing of that nature, it being well known that mercurius corroſivus aſcends ſooner than mecurius dulcis; whereas, through the whole of the ſublimation, what aroſe was a pure mercurius dulcis, exactly like that which is obtained in the common manner. 3*dly*, I have mixed this precipitate with one fourth part of quickſilver and ſublimed it, upon a ſuppoſition that if it contained too much mercurius corroſivus it would be able to unite with more quickſilver; but ſo far was this from being the caſe, that the quickſilver was not diminiſhed in weight by the experiment. 4*thly*, It is known that cauſtic alkalis and lime-water give mercurius dulcis a black colour. The ſame thing happened with mine. The black colour is no other than quickſilver divided into very fine particles.

" THAT the proceſs I have been deſcribing is more advantageous than that which is uſually adopted, I cannot doubt; becauſe, in the firſt place, this mercurius dulcis can be prepared with leſs difficulty, with leſs expence, and without employing corroſive ſublimate. 2*dly*, As there can be no danger of its being in any degree corroſive, provided it be ſufficiently edulcorated, it may always be given with ſafety. 3*dly*, The operator is not expoſed to that noxious duſt which in the old method ariſes during the trituration of the corroſive ſublimate and quickſilver. 4*thly*, This is much finer than the common mercurius dulcis, it being impoſſible to make the latter equal to it in this reſpect, however long it may be triturated."

CALOMEL

Calomel, thus prepared, will prove ſafe and excellent, not only for internal, but eſpecially for external uſe, either in powder, or ſuſpended in ſimple water or ſome mucilaginous ſolution; occaſionally alſo a drachm of it may be mixed with four ounces of lime-water, under the name of *lotio ſyphilitica nigra*, to diſtinguiſh it from the *lotio ſyphilitica flava*, made with corroſive ſublimate and lime-water. Calomel, when well prepared, muſt give the lime-water a black colour, as corroſive ſublimate does a yellow. Calomel, thus prepared, may likewiſe, occaſionally, be uſefully applied in the manner recommended by the late Mr. *Clare*, who recommended to rub it into the gums or inſide of the cheek, from two to three grains every morning and evening. It would be by far the eaſieſt method of adminiſtering mercury to thoſe patients who cannot bear mercurial preparations upon their ſtomach, and diſlike to make uſe of the mercurial frictions. It labours, however, under a material objection, that it ſoon produces a ptyaliſm.

Dr. *Ward's white drop*, being a ſolution of mercury in nitrous acid, precipitated and rediſſolved by ſal ammoniac, comes likewiſe under this head, and proves, in ſome caſes, a valuable medicine.

The *hydrargyrum vitriolatum*, or *calx hydrargyri vitriolata*, comonly called *turpeth mineral*, or *mercurius emeticus flavus*, is a medicine now very little uſed, except by thoſe who think a mercurial vomit preferable to one of emetic tartar or ipecacuanha, for curing a ſwelled teſticle ariſing from a venereal cauſe. Some inſtances, however, I have ſeen, where this

medicine, given daily in very ſmall doſes, effectually removed moſt obſtinate venereal complaints of the ſkin.

I COME, laſtly, to ſpeak of a medicine, which, ſome time ago, and even yet, is made uſe of by many for the cure of the lues; I mean *Plummer's powder or pills;* which, properly ſpeaking, are not a mercurial preparation, but a mechanical mixture of mercurius dulcis and ſulphur of antimony. I have already obſerved, that mercurius dulcis, when prepared by ſublimation, is a very different medicine in different countries and places; that it is therefore a medicine not to be depended upon: for this reaſon, I never would adviſe any practitioner, as well for his own ſatisfaction, as that of his patient, to truſt to Plummer's pills for curing the venereal diſeaſe. Plummer has compounded the calomel with ſulphur of antimony, probably for the purpoſe which ſtill ſeems to be expected by thoſe who make uſe of this compoſition, viz. by means of the ſulphur to prevent ſalivation, and to direct the mercury to the ſkin. This ſeems eſpecially to be the deſign in cutaneous eruptions of the venereal kind. But though this medicine may ſometimes be effectual in removing cutaneous diſorders, I muſt, from my own experience, as well as from that of ſeveral other unprejudiced practitioners, pronounce it to be a very improper one for curing a confirmed lues. Repeated inſtances, indeed, have come under my obſervation, where theſe pills having been taken for a conſiderable time, have removed the ſymptoms for a time, without effecting a radical cure; which is to me a ſufficient reaſon for thimking it an unſafe

unſafe medicine, and conſequently that no practitioner ought to put confidence in it for the cure of the lues, when he has ſafer medicines for this purpoſe at his command.

WHETHER crude mercury boiled with ſimple water communicates to it ſomething of its qualities, and with what ſucceſs ſuch a decoction might be adminiſtered for curing venereal complaints, I am not able to ſay. I have ſeen this decoction given to children affected with worms in different parts of the continent: and I know of a dog in London who was radically cured of a moſt obſtinate mange, for which a variety of medicines had been tried in vain, from the uſe of this decoction for his common drink.

CHAP. XV.

On PTYALISM, *or* SALIVATION.

IT has been a matter of controverſy, whether a confirmed lues may be radically cured without ſalivation; and though there is now hardly any medical man who doubts of the poſſibility of a perfect cure without it, there are ſtill many who employ ſalivation, not only for the cure of the lues, but, in ſome countries, for that of the clap alſo. This mode of treatment, in the former caſe, is ſtill very much in vogue, in private practice, as well as in hoſpitals, eſpecially in France: in other countries it is almoſt entirely confined to hoſpitals.

How far this practice of ſalivating venereal patients is juſtifiable, ſhall be the ſubject of my preſent inquiry.

IT has been the opinion of Dr. *Friend*, and many ancient as well as ſeveral modern writers, that a ſalivation is not only neceſſary to effect a radical cure of the lues, but even that the greater the ſalivation, the more certian and effectual will be the cure of the lues, eſpecially when the bones are affected.

I MUST confeſs, I have always experienced the direct contrary of this aſſertion. Amongſt a great many

ny patients of different ages and conſtitutions, in different climates, who have been under my care, I have not only not found one who required ſalivation, but I have, on the contrary, conſtantly obſerved, that the greater the ſalivation, the leſs certain and effectual was the cure of the lues. This is ſo true, that even the modern advocates for ſalivation unanimouſly confeſs, that a ſtrong ſalivation is hurtful, and that only a gentle one ſhould be raiſed. Could I allow this to be right, I would obſerve, that to ſtop, or even to moderate, a ſalivation once begun, is in many caſes more eaſily ſaid than accompliſhed. This is often entirely out of our power; and it is yet one of the great deſiderata in medicine, to know a ſpecific remedy that will produce ſuch an effect. This is ſo little in our power, that I have ſeen more than once patients carried off by ſalivation (their ſtrength being totally exhauſted), before it could be leſſened or ſtopt by any remedy whatſoever. Others who did not ſink entirely under it, remained languid from the evacuation for months and even years; and ſeveral I have ſeen die, on a conſumption brought on by ſuch a courſe. Beſides, a ſalivation is not only very troubleſome to the patient, by ſpitting day and night, and by filling the room with a very diſagreeable ſmell; but frequently alſo produces painful ulcers in the mouth, fauces, &c. which, if not taken care of in time, or being miſtaken for venereal ones, by continuing the uſe of mercury, become more dangerous than the venereal diſeaſe itſelf.

It may ſeem ſurpriſing, therefore, how ſuch a dangerous method of attempting the cure of the venereal

nereal diſeaſe as that by ſalivation ſhould ſtill be retained and practiſed in ſome hoſpitals. The three following reaſons, indeed, I have heard alleged. 1. To confine the patients with a clap or lues to the room, and to prevent them from getting a freſh infection before they are cured of the firſt. 2. To get rid of ſuch poor patients in a month or five weeks, in order to take others in their place into the hoſpital, who are treated and ſent away in the ſame manner. 3. Becauſe many of the lower claſs of people have an unhappy prejudice in favour of this method, and imagine they cannot be radically cured without what they call a good and continued ſalivation. Theſe reaſons, however, appear to me wholly inſufficient. To prevent the patients from getting a freſh infection, better means might be eaſily followed. With regard to the ſecond point, I think it more reaſonable, and more humane, to cure a ſmaller number of patients radically without ſalivation, even though a longer time ſhould be taken up for the cure, than to relieve the complaints of a great number in a ſhorter time by ſuch an uncertain, troubleſome, and ſometimes dangerous method. We may add to this, that experience daily ſhows, that a number of thoſe patients who ſeem to be cured by the ceſſation of the ſymptoms during a ſalivation, very frequently return in a ſhort time after to the hoſpital with the ſame ſymptoms they were affected with before, or find themſelves obliged to ſeek aſſiſtance ſomewhere elſe, at the ſame time that they ſolemnly proteſt againſt their having expoſed themſelves to a new infection. The third reaſon alleged in favour of ſalivation is the worſt of all. I am of opinion, that no perſon of integrity,

tegrity, who practiſes medicine, ſhould ever comply with the prejudices of his patients when they may be hurtful to them, or when he knows that by a contrary method he is able to cure them with greater certainty and ſafety. Beſides, it will be an eaſy matter for a phyſician or ſurgeon, who knows how to gain the confidence of his patient, to convince him of the folly of ſuch prejudices. Salivation, therefore, being, in my opinion, an exceptionable method of cure in any circumſtances whatever, I think it, in all caſes, moſt prudent to avoid it; or, if it ſhould have taken place, to moderate and remove it as ſpeedily as poſſible.

The method of preventing a ſalivation I have laid down above, when ſpeaking on mercurial frictions. The means to be uſed for this purpoſe are ſhortly the following. 1. A careful adminiſtration of mercury both as to its preparation and doſe. 2. The avoiding cold or damp air, eſpecially at night. 3. The uſe of warm clothes; or, in a cold damp ſeaſon or climate, the conſtant wearing of flannel next the ſkin. 4. The repeated uſe of warm baths, and the internal uſe of diaphoretic, or diuretic decoctions along with the mercury. 5. The avoiding too hot rooms and confined air. 6. Covering the neck and head but very ſlightly day or night. 7. Taking a doſe of gentle cooling phyſic, and intermitting the uſe of the mercury as ſoon as the breath and teeth begin to be affected. 8. If the patient be not of a phlogiſtic habit of body, a free diet, with the moderate uſe of wine, is to be ordered, rather than a low one. Smoaking tobacco ſhould alſo be avoided, during a courſe

courſe of mercurials, by thoſe who are accuſtomed to it.

It is likewiſe to be obſerved, that, in general, a ſalivation will take place more readily under the uſe of acrid mercurial preparations, and in a cold and damp ſeaſon or climate; that ſome conſtitutions are more diſpoſed to it than others; and that particularly thoſe who have previouſly taken mercury, are often ready to fall into a ſalivation by uſing the ſmalleſt doſe, though perhaps in the former diſeaſe they felt no ſuch effect from the uſe of it.

A variety of medicines given ſeparately, or combined with mercury, have been recommended for preventing it from affecting the mouth, as well as for checking a ſalivation after it has taken place. The principal of theſe are ſulphur, ſulphur of antimony, camphor, the Peruvian bark, and iron. By a careful attention, however, to the foregoing rules, I think it is in general not very difficult to avoid a ſalivation, without having recourſe to any of theſe medicines; eſpecially as I have ſeen ſome of them repeatedly applied without ſucceſs. With regard to the latter point, viz. the abating and removing a ſalivation when once begun, I found it moſt always a very difficult matter: the following method, however, with an exact obſervance of the rules above mentioned, will frequently be attended with ſucceſs.

As ſoon as the patient feels his mouth affected, he ought to leave off the uſe of mercury, and keep within doors, in a moderately warm room, if the ſeaſon be

be cold. If his ſtrength and conſtitution will allow, we may adminiſter him a gentle laxative; but we ought to be careful about preſcribing purgatives, becauſe they will often bring on a diarrhœa, which we ſhall find ſometimes great difficulty to ſtop, and which may prove dangerous in its conſequences. If his ſtrength will bear it, he ſhould likewiſe, for four or five days, be placed every evening in a warm bath, rubbing his body during that time with a fleſh-bruſh or piece of flannel; and when he comes out of the bath, he is to dreſs himſelf again immediately in flannel-cloaths. If phlogiſtic ſymptoms occur, bleeding may be neceſſary; the patient is to be confined to a low diet, and drink barley-water or any other mucilaginous decoction; but if his ſtrength be very much reduced, a good nouriſhing diet, together with the uſe of wine, an infuſion of Peruvian bark, or guaſſia-wood in wine or cinnamon-water, with ſome preparation of iron, and the free country air, are certainly more proper. If the air be dry, he ſhould not confine himſelf to his room, but go abroad a little, unleſs it be very cold. When the ſalivary ducts are very much relaxed, the mouth not very painful, and the ſpitting continues undiminiſhed, an aſtringent gargle may, with proper precautions, be preſcribed. It may be made of the decoction of Peruvian bark, of *tormentilla erecta*, or of the *cortex ſalicis albæ*, in red wine or water; to which, according to circumſtances, may be added ſome tincture of gum-lac or of myrrh and honey of roſes. Common ſulphur has now and then a very good effect for relieving a ſalivation. The ſulphur of antimony has been recommended in ſuch caſes as a diaphoretic. An eminent

phyſician has recommended for this purpoſe the *aurum fulminans*, given every day from three to five grains, as a very efficacious medicine; but having never had occaſion to try this remedy myſelf, I am unable to ſay whether this advice is founded on experience, or only on a theory derived from the chemical affinity or attraction between mercury and gold. In an obſtinate ptyaliſm, a bliſter, ſeton, or iſſue, in the neck, together with the internal uſe of purified ſulphur and camphor, and the volatile liniment applied to the throat, ſometimes proves ſerviceable; and in deſperate caſes, we might alſo try the effect of repeatedly pouring cold water over the head and face, letting the patient ſit in the mean time with the reſt of the body immerſed in a warm bath.

CHAP.

CHAP. XVI.

On particular VENEREAL COMPLAINTS, *which require a peculiar Method of Cure.*

I. *On the* VENEREAL OPHTHALMIA.

THERE are two diſtinct ſpecies of venereal opthalmia. The one ſeems to be more of a chronic kind, comes on gradually, and ariſes from a tainted maſs. The other is the moſt acute, violent, and dangerous of any ophthalmia I know of: it comes on ſuddenly, and owes its origin, as far as I have been able to obſerve, to a ſudden retropulſion of a recent venereal clap.—I have ſeen three inſtances of this dreadful diſorder, every one of which proved fatal to the ſight of the ſufferer. In two caſes, both eyes were affected with blindneſs; in the third, one was affected immediately, and ſeveral years after the ſight of the other was likewiſe loſt, without any other apparent cauſe. All old practitioners with whom I have converſed about this dreadful complaint, and who have obſerved it ſeveral times in their practice, were of opinion that it always originated from a retropulſed recent clap, by way of metaſtaſis. In the three caſes which I juſt mentioned, the diſeaſe was certainly accompanied with a ſuppreſſion of the clap: but whether that ſuppreſſion was the cauſe of the ophthalmia, I was not able to determine with certainty;

and am much leſs capable to account for ſuch a metaſtaſis: though great connection ſubſiſts between the eyes and the parts of generation.

But whatever may be the cauſe of theſe ophthalmies, the fact is this. In the three inſtances which came under my obſervation, the diſeaſe aroſe in a cold climate in winter, after the patient, affected with a recent clap, had been expoſed to violent cold in the open air. None of them had ever had any complaint in the eyes before. The diſcharge from the urethra was evidently diminiſhed or aboliſhed. In the mean while, a diſcharge of a puriform matter of a yellowiſh-green colour, reſembling that of a clap, took place from the eyes, with the moſt excruciating pain, which was rendered inſupportable on the leaſt application of light. The ſame matter which ran out of the eyes, ſeemed, as far as I was able to ſee by forcing up the eye-lid, to be extravaſated in the whole anterior chamber of the eye, and, as it were, infiltrated between the lamellas of the cornea tranſparens. All remedies which were applied proved ineffectual, and perpetual blindneſs was the conſequence.

As caſes of this kind may be inſtructive, I ſhall tranſcribe one of them from my Medical Journal. The patient, a young man of a ſtrong dark complexion, of twenty-nine years of age, a captain in the army, was ordered on guard in the month of January, whilſt he was afflicted with a recent, violent clap. Unfortunately the day was exceſſively cold, and he was by duty much expoſed to the open air

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all day and the evening: in the night he found himſelf at once afflicted in both eyes with the moſt excruciating pain, and intolerance of the ſmalleſt degree of light; to which next day followed a diſcharge of puriform matter from both eyes. Upon inſpection, the albuginea was every where highly inflamed, and very much ſwelled. The phyſician who was called applied, beſides the common remedies, ſuch as bleedings, purgatives, &c. a fomentation of hemlock. On the third day, upon a cloſer examination, the cornea was found entirely opaque, and an hypopyon formed; no ulceration appeared. The uſe of hemlock was ordered to be continued. Some days after, the inflammation and running abated; but the cornea remained opaque, ſeemed to be very much thickened, and the patient remained perfectly blind. In this patient, I clearly ſaw the arteries of the cornea tranſparens, coming from the albuginea, inflamed, and ſo filled with red blood, as if injected like an anatomical preparation, even till the fifth week of the diſorder.

In none of the three caſes which I had acceſs to obſerve, any remedy was applied by the practitioners to reſtore the running of the clap; nor was there an inciſion made into the cornea to diſcharge the extravaſated matter: The only two remedies from which I would expect any efficacious relief in ſuch an ophthalmy, beſides the general and topical evacuations by purgatives, leeches, bliſters, &c. with the internal and external uſe of mercury.

I was once inclined to believe, that this kind of ophthalmia

ophthalmia does perhaps arise from uncleanliness, when the patient affected with a clap, or shankers in the genitals, touching those parts, and afterwards, without washing the hands, touches his eyes. I have certainly seen ophthalmies, and venereal ulcers of the eye-lids, nostrils, lips, more than once arising from such carelessness: but in these cases I have never observed an inflammation but in one eye, and it was always far from being so violent as the kind just mentioned; and, like ophthalmies arising from a tainted mass, gave way to the topical application of the blue ointment; which, together with the internal use of mercury, is indeed the sovereign remedy for several ophthalmies.

The chronic venereal ophthalmies arising from a tainted mass, prove, in many cases, extremely obstinate for many weeks and months. They require, besides a very low diet, a regular mercurial course, especially with sublimate, if the patient can bear it; repeated purgings; and in some cases, especially if the eye-lid be the part affected, the external use of the mercurial ointment, or what is, according to the observations of Dr. *Cullen*, more preferable, the citrine ointment rubbed down with double the quantity of hog's lard, in order to render it less acrid. Laudanum dropped into the affected eye gives sometimes the most evident relief. Bathing the eye with a weak solution of sublimate, or with the lac hydrargyratum four or six times a-day is likewise serviceable

II. *On* Venereal Deafness.

I have ſeen ſeveral inſtances where deafneſs, with a violent pain of the ear, was brought on by venereal ulcers affecting the orifice of the Euſtachian tube in the fauces; and I have met with one inſtance, where a perfect deafneſs was the conſequence of a ſtopped diſcharge of a clap by the internal uſe of turpentine. The patient had had no ſhankers, nor any other venereal complaint ever before.

III. *On* Venereal Sore Throat.

Venereal ſore throats, as well as venereal ulcers of the mouth and fauces, ſhould, as I mentioned above, be carefully diſtinguiſhed from ſcorbutic ones, or from thoſe originating from the ſaliva rendered acrid by mercury; and more eſpecially from thoſe which, though really venereal in their origin, have now changed their nature, and acquired a character entirely different from the original diſeaſe, as by continuing the uſe of mercury, the patient may be materially, and perhaps irrecoverably, hurt. Practical judgment muſt be our only ſure guide in that caſe. Deep ulcers covered with a white lardaceous cruſt, and confined by a hard elevated border, with a ſtrong redneſs round about them, will, I think, ſeldom miſlead if they are treated as venereal. Venereal ulcers in the throat are ſometimes ſeated ſo low down, and ſidewards, that we cannot eaſily diſcover them at firſt ſight, and thence we are ſometimes led to miſtake the nature of the diſorder. An account of the following

following caſes may perhaps be uſeful to young practitioners.

A GENTLEMAN of a ſtrong plethoric conſtitution, fifty-five years of age, was affected with a ſore throat and fever. The phyſician, after examining his throat and pulſe, ordered bleeding, with an antiphlogiſtic gargle and purge; when the diſeaſe not abating eight days after, another practitioner was called, who repeated bleeding, purging, and ordered a different gargle, from the uſe of which the patient found himſelf better. At the expiration of ſeven weeks, when he felt, as he expreſſed himſelf, the diſeaſe was not quite gone, I was conſulted. After the former preſcriptions were ſhown to me, I examined his throat; and though I could not diſcover any ulcer, told him I ſuſpected a venereal cauſe; which he hardly would agree to, telling me that he had no venereal complaint theſe many years paſt, and that ſince that time he had enjoyed the moſt perfect ſtate of health. I deſired to examine his throat once more; which he readily complied with, though he was one of thoſe perſons who, with the greateſt difficulty, can let their throat be examined: with a wax taper in one hand, and depreſſing the root of the tongue by means of a large ſpatula as much as poſſible with the other, I diſcovered very low down on the right ſide, a deep but ſmall venereal ulcer, which had eſcaped my ſight at firſt, and would now have done ſo, had I not examined the throat with ſuch peculiar care. Upon mentioning to him the evident cauſe of his diſorder, my advice was complied with; and after the internal uſe of mercury for eight days, his ſore throat

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was perfectly gone, and by continuing it a month longer, a radical cure was obtained.

The other patient was a lady of rank. She had but firſt felt a ſlight difficulty in ſwallowing within a few days, which, being froſty, ſhe aſcribed it to a cold. I immediately, upon inſpection, diſcovered the cauſe of the diſorder; and, as women have always a right to the greateſt delicacy and ſecrecy of a phyſician, without aſking her any queſtions, I ordered her to keep her throat warm, and promiſed to ſend her ſome medicine which would relieve her in a few days; and the ſame was afterwards, under another form and pretence, ordered to be continued for a few weeks longer, till I thought her perfectly ſafe.

Last ſummer, I was conſulted at Paris by a young gentleman, of about twenty-eight years of age, about a ſore throat for which he had taken advice and medicines already, for the ſpace of three weeks, without any relief. I told him, that, from the very appearance of his face and eyes, I ſuſpected quite a different cauſe of his diſorder than he had hitherto imagined; which indeed was moſt evidently confirmed by a large venereal ulcer; which, upon inſpection, I found ſeated very low down behind the velum. He then gave me the following account: That he had been affected with a violent clap two years ago when he was at Venice, which, for a particular reaſon, he had wiſhed to be removed or ſtopped as ſoon as poſſible; that, for this purpoſe, he was recommended by a friend of his to a ſurgeon in that place, who was in poſſeſſion of an injection, which

had that infallible effect. That this ſurgeon complied with his deſire, though with reluctance; and foretold him, that, ſome time after being cured thus haſtily by his injection, the venereal diſeaſe would break out in ſome other part of the body; aſſuring him, that he had ſeen the ſame effect, from the ſame remedy, happen in ſeveral other patients who applied to him in the ſame manner he did. That he neglected this caution; that the running was perfectly ſtopped in 48 hours; and that he had never thought more about it, having been perfectly free from venereal as well as any other complaints ever ſince. This caſe was to me a very inſtructive one. Firſt, it ſhows how long the venereal poiſon lies ſometimes concealed in the maſs, without producing any ſenſible effects; And, ſecondly, it evidently confirms what I have aſſerted above, that the poiſon which produces a clap, may be, and is moſt frequently, the very ſame with that of the ſyphilis; and that, if abſorbed into the maſs, it therefore produces the ſame effects. But, laſtly, it alſo ſhows, which I could not have expected *à priori*, that a recent clap may ſometimes be ſtopped or repelled, without producing ſwelled teſticles, iſchury, ſtrictures, or any other immediate effects in the maſs.

Venereal ulcers of the throat require ſometimes, beſides a courſe of mercury, topical applications; ſuch as injections or gargles made of a ſolution of ſublimate mixed, according to circumſtances, with the tincture of maſtich, &c. But if the ulcers are owing to the acrimony of the ſaliva, they ought to be kept conſtantly clean, and mercury ſhould be diſcontinued.

diſcontinued. If they ariſe neither from the one or the other of the cauſes juſt mentioned, but are of that peculiar nature deſcribed above under the head of *Venereal Ulcers*, they require, inſtead of mercury, the internal and external uſe of opium. Powerful tonics, internally as well as externally, in a gargle, have been found very uſeful in ſuch caſes.

IV. On Venereal Complaints *of the* Skin.

Cutaneous diſorders of a venereal nature, ſuch as venereal tetters, venereal ſcald-head, venereal leproſy, &c. are often very obſtinate. It is in theſe complaints properly, where the ſolution of ſublimate, given internally, proves now and then excellent; and I think I have obſerved, that it often effectually removes the diſeaſe of the ſkin without removing radically the lues: This, at leaſt, I aſſert with regard to colder climates; as to warmer climates, I know certainly many patients who have been radically cured of the ſyphilis by the ſublimate alone.

Besides the internal uſe of the ſublimate, warm baths made with a decoction of bran, in every gallon of which half a drachm of ſublimate is to be diſſolved, gently rubbing at the ſame time the affected part, have ſometimes proved to me very uſeful. For more confirmed venereal complaints of the ſkin, the topical application of the ſolution of the ſublimate, the citrine ointment ſometimes alone, and ſometimes with the addition of the ſaturnine, have ſucceeded in tetters, tinea, &c. where all other remedies proved ineffectual. The decoctum Luſitanicum, the decoc-

tion of the ſtipites dulcamaræ, of the mezereum root and eſpecially that of the lobelia ſyphilitica, deſerve, for theſe as well as other obſtinate and inveterate venereal complaints, in my opinion, a much greater attention than is uſually paid to them. I have ſeen a moſt obſtinate and inveterate diſeaſe of the ſkin, of a venereal nature, cured by a ſolution of turbeth mineral in ſmall doſes, where all other remedies failed. Some phyſicians pretend to have ſeen great ſucceſs alſo from arſenic; but I never tried this latter.—The decoctum ſyphiliticum roborans is, in many caſes, a ſovereign medicine. The infuſum ledi paluſtris has proved very effectual in many caſes of leproſy in Sweden: but it ought to be obſerved, as a general rule, that without the uſe of warm emollient baths, or vapour-baths, all theſe medicines will often fail in producing the deſired effect

V. *On* Venereal Excrescences.

Venereal excreſcences on the ſurface of the ſkin, known by the different names, *warts*, *tubercles condylomata*, *ficus*, *mariſca*, &c. ariſe either from an original infection, in which caſe we conſider them as a local diſeaſe, and preſcribe local remedies; or they originate from a tainted maſs, which indeed is more frequently the caſe, and then a full mercurial courſe will make them diſappear, ſometimes, without any external application. But frequently external remedies are likewiſe requiſite. Cauſtics have been recommended for that purpoſe: they are now and then employed with ſucceſs; but in ſome caſes I have ſeen them productive of bad effects. Exciſion has been

been likewiſe recommended, and is ſometimes neceſſary; but I have ſeen ſeveral inſtances where, after theſe excreſcences had been cut out repeatedly (even after a full courſe of mercurials), they grew again and again, ſometimes to a larger ſize than they had formerly. To prevent this regeneration, ſeveral remedies have been propoſed; of which, in all obſtinate caſes that have come under my obſervation, I have obſerved only two or three which were ſucceſsfully employed, after the maſs had been previouſly perfectly purified. The one conſiſts in mercurial fumigations, the other in the application of the *juniperus ſabina* L. either by itſelf in the form of a powder, or mixed with red precipitate in the form of an ointment; and the third is the liquor *ad condylomata*, lately propoſed by Mr. *Plenck*. I have applied it once or twice a-day with a hair pencil, in ſeveral caſes, with very good effect. In caſes where a great number of ſmall warts had ſprung up about the genitals, the ſolution of ſublimate in ſimple water or lime-water I have obſerved ſometimes to ſucceed perfectly well. If warts have a ſmall baſis, and are but few in number, the beſt remedy is a ligature made tighter every day. I have ſeen a man with ſeveral hundred little warts upon the part of the chin where the beard grows, and underſtood his diſeaſe to be owing to an ill-treated lues.

VI. On Venereal Weakness, or Impotency.

This complaint, though not dangerous, is very alarming, and renders the mind of the patient extremely uneaſy. I have repeatedly obſerved it; but,

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in a particular manner, in one patient, who ſeveral months before had been affected with a violent clap; of which, at laſt, he was cured, after having undergone a tedious and very improper treatment. The only remaining ſymptom was now a total inability and want of deſire of venery, which rendered him extremely low-ſpirited. On conſulting me, I judged the complaint to proceed from the venereal poiſon lurking in the body, and preſcribed him a mercurial courſe, and afterwards ſome tonic medicines, with two tea-ſpoonfuls of Hoffmans's anodyne liquor morning and evening. He was likewiſe ordered to waſh the ſcrotum and ſpermatic cord twice a-day with a table-ſpoonful of the ſame liquor mixed with ſome water: in three weeks time he had ſufficient reaſon to be as high-ſpirited as ever.

VII. *On* Venereal Pains, Spasms, *&c.*

Fixed or wandering pains, ariſing in different parts of the body, are generally aſcribed, by all patients who were formerly affected with the lues, to the remains of the venereal poiſon in the maſs. This is indeed ſometimes the caſe; but it ought to be obſerved, that thoſe pains, ſo generally aſcribed to the venereal poiſon, are often owing to very different cauſes; which, if not properly diſtinguiſhed, we ſhall find ourſelves frequently diſappointed in the effects of the remedies preſcribed.

Pains ſimilar to venereal ones are often the effects of the improper uſe of Mercury. theſe caſes ought to be carefully diſtinguiſhed in practice; becauſe, if the

the venereal diſeaſe has not been radically cured, and the pains ariſe from a half-cured lues, the uſe of mercury will be neceſſary to complete the cure, (though the patient will often be of a contrary opinion, conſidering the length of time and quantity of mercury he has already taken); whereas, if the venereal virus has been radically cured, the uſe of mercury will prove evidently hurtful. I know patients who, having made uſe of mercury repeatedly in their younger days for ſeveral venereal complaints, find themſelves now, whenever they take the leaſt quantity of mercury, conſtantly affected with the moſt violent rheumatic pains in different parts of the body. Authors, who have mentioned this latter diſeaſe, generally aſcribe it to the mercury lodged in the bones; nay, there are even examples recorded in medical hiſtory, where mercury had been found, after the death of ſuch patients, collected in globules in different parts of the body, eſpecially in the bones and their cavities. Whatever credit may be given to thoſe aſſertions, it is certain, that we may generally, and ſometimes pretty eaſily, cure thoſe patients by proper regimen, warm baths, and by adminiſtering, at the ſame time, internally, proper tonic medicines, either alone, or united with antimonials. But if thoſe pains, inſtead of being of the chronic kind, ariſe from a ſudden check of perſpiration during a a mercurial courſe, the uſe of tonic medicines would be improper. In ſeveral deſperate caſes of this kind, where the body ſeemed as if it was affected with a general ſpaſm or tetanus, I have found, beſides the warm bath, eſpecially the vapour-bath, the ſulphur of antimony, united with the extract of hemlock, a moſt efficacious remedy,

given

given to the quantity of fifteen grains of each a-day. Dover's powder, with a proper regimen, proves ſometimes, in this caſe, as well as in rheumatiſm, a very ſerviceable medicine.

VIII. *On* Venereal Complaints *of the* Bones.

The bones are ſeldom affected by the venereal poiſon, but in a confirmed or neglected lues. I have ſeen, however, one inſtance where the patient, being affected with a ſhanker on the glans, was attacked the fifth day after with a conſiderable ſwelling in the lower part of the ulna.—In theſe caſes, the longer the diſeaſe is neglected, the more difficult and tedious is the cure; and of all others, the caries, or ulceration of the external ſurface, and the corruption of the internal cavity of the bones, are the moſt diſagreeable and tedious.

In all caſes of ulcerated bones we ought to remember, that they cannot be cured until the poiſon be totally eradicated from the maſs. Topical applications ſeem to have very little effect; though the eſſential oil of ſaſſafras has been recommended by ſome. Mr. *Pleuck* recommends a lotion compoſed of eſſentia maſtichina, corroſive ſublimate, and honey of roſes. Beſides this, he directs the internal uſe of the Peruvian bark, and mercury mixed with aſafœtida, together with a decoction of ſarſaparilla, united with mezereum and cicuta: by theſe, he ſays, that he cured ſeveral perſons of the diſorders juſt mentioned.

Venereal exoſtoſes and tophi, eſpecially thoſe in the middle of the tabia, ſternum, and bones of the head, will ſometimes, eſpecially at night, give the moſt excruciating pain. In theſe caſes, I have obſerved no good effect from any topical application whatever. Mercury, bliſters, or an inciſion, have been recommended for this purpoſe; but the ſaline mercurial preparations are the medicines moſt to be depended upon, together with the decoctions of the woods, eſpecially the decoctum mezerei, the æthiops antimonialis of Huxham; according to circumſtances, opium in large doſes, may be likewiſe tried in obſtinate caſes.

Of the extraordinary fragility of the bones mentioned by ſome writers as proceeding from a venereal cauſe, I have never ſeen an inſtance; though it may not be improper to mention one caſe which, I think, may be referred to this head: A man broke his tibia by a fall; but after the beſt treatment of the fracture, and twelve weeks confinement, upon examination it was found, that no calus was formed, and the broken bone remained nearly as looſe as at firſt. After a cloſe inquiry and conſultation, the venereal poiſon was ſuſpected, and a courſe of mercury preſcribed; which ſucceeded ſo well, that in a few months after the patient was perfectly cured.

CHAP. XVII.

On Complicated VENEREAL COMPLAINTS, *and ſuch as have been ſuſpected to be of the Syphilitic Kind.*

To this claſs belong ſyphilitic complaints, joined with ſea-ſcurvy, pſora, leproſy, rheumatiſm, gout, and ſcrophula.

THE diſeaſe called the *Sibbens* in Scotland, was ſuppoſed by ſome to be a complication of the venereal diſeaſe with the itch; but I have referred it under the ſyphilis, eſpecially as its ſymptoms are ſo nearly related to the new venereal diſeaſe of Canada. *See* Chap. XII.

SYPHILIS with *ſea-ſcurvy* requires the uſe of antiſcorbutic and ſtrengthening diet or medicines, previous to the uſe of mercury.

SYPHILIS with *leproſy* requires warm baths, the decoctum ſyphiliticum roborans, or the decoctum corticis ulmi with antimonials.

SYPHILIS with *rheumatiſm* is beſt relieved by warm baths, the vapour bath, together with the uſe of the fleſh-bruſh, and the internal uſe of the decoctum lignorum, eſpecially the decoctum of guaiac and æthiops antimonialis of *Huxham*.

SYPHILIS

Syphilis with *ſcrophula* is relieved by ſea-bathing and ſea-water taken internally. Hemlock united with the Peruvian bark have been found ſucceſsful in ſome caſes. In places where the patient has no acceſs to the ſea, we may prepare artificial ſea-water compounded of the ſame conſtituent parts as ſea-water, by mixing to five pints of water two ounces and 433 grains of pure common ſalt, 380 grains of magneſia muriata, and 45 grains of *terra calcarea vitriolata* or gypſum.

The *Yaws* is only a local excreſcence or external cutaneous diſeaſe, entirely different from the lues; the cure of which is often performed by nature, without any internal or external medicine, but may be, according to the obſervations of Dr. *Nooth*, accelerated by lint dipped into a ſolution of blue vitriol in water, frequently applied to the parts.

Whether the *Mal de Siam*, the *Variola Amboinenſis*, and a diſeaſe nearly ſimilar to this latter, deſcribed lately by Dr. *Schotte*, to which the negroes at Senagambia are ſubject, belong to the head of ſyphilitic complaints, I am uncertain.

CHAP. XVIII.

On VENEREAL COMPLAINTS *diſguiſed, ſuch as* CONSUMPTION, RHEUMATISM, FEVERS, &c.

SOME perſons formerly affected with venereal complaints, of which they have been apparently cured ſeveral months, nay ſometimes ſeveral years, grow emaciated, begin to cough, and are affected with hectic fever, and other ſymptoms which accompany a conſumption or a phthyſis pulmonalis. Theſe complaints are often miſtaken and aſcribed to ſome other cauſe, and medicines ordered for the moſt part without any ſucceſs. Sometimes, likewiſe, the diſorder ariſes from the prepoſterous uſe or too large quantities of mercury. I have ſeen ſeveral inſtances where a hectic fever with cough, and ſometimes even with a puriform expectoration, far from owing its origin to an ulceration of the lungs, aroſe from a latent venereal poiſon, without any other venereal ſymptom in the body. The ſame has been obſerved by others; and Mr Brambilla relates a caſe, which ſhows ſuch a ſtriking inſtance of the kind, that I ſhall tranſcribe it here. An electuary, he ſays, was preſcribed for a conſumptive man, who was in a deſperate ſituation. By a miſtake of the apothecary, the electuary was given to a venereal patient to rub himſelf with, and the mercurial ointment, inſtead of the electuary, was ſent to the conſumptive patient to take it internally. The conſumptive man, knowing nothing of the miſtake,

take, took a quantity of the ointment, about the bigneſs of a nutmeg, two or three times a-day, and was effectually cured of his diſorder, to the no ſmall ſurpriſe of his phyſician, who learned by chance from the apothecary the miſtake that had happened. This miſtake was certainly a very happy one for the patient; and though it might be doubted whether the conſumption proceeded from a venereal cauſe, it proves however evidently that it yielded to mercury. I had ſeveral patients of this kind who were radically cured of conſumption by adminiſtering to them nothing but a courſe of mercury.—The ſarſaparilla in powder, from half an ounce to an ounce in a-day, has been found uſeful in ſeveral caſes of this kind.

Agues, or intermittent fevers, have alſo been obſerved by Dr Wherlhof and others, either to be produced by the venereal virus, or concomitant with the venereal diſeaſe; and mercury, combined with the bark, has been given with ſucceſs in thoſe caſes. Perhaps ſome of the fevers cured by Dr. Lyſon, with calomel, have been of the ſame kind.

Flying *rheumatic pains*, violent *headachs*, and *pain in the hip*, ſometimes originate from this ſource. The warm bath, with ſome ſaline preparations of mercury, with the decoction of the ſtipites dulcamaræ, I have ſeen cure diſorders of this kind, which reſiſted every other medicine. Mercury, with the decoction of daphne mezereum, or of daphne laureola, L. has alſo been recommended as a very efficacious medicine for thoſe complaints.

CHAP.

CHAP. XIX.

On VENEREAL COMPLAINTS *incurable by* MERCURY.

I HAVE already ſpoken ſo fully concerning the nature and cure of theſe complaints under the different heads of *Venereal Ulcers*, *Exulcerated Buboes*, *Venereal Sore Throat*, *Diſeaſes of the Skin*, *Venereal Pains*, and eſpecially in the chapter where I conſidered the reaſons why ſome venereal complaints do not yield to mercury, that very little remains to be added here.

I MUST only obſerve, that I have found moſt, if not all, of theſe complaints admit of great relief, or even of a radical cure; and that the great point for accompliſhing this deſirable end, lies leſs in theſe complaints themſelves, than in an exact knowledge of their nature. This certainly requires ſometimes more practical ſagacity than is generally imagined. The great object is, to diſtinguiſh exactly; *firſt*, whether thoſe runnings, ulcers, cutaneous eruptions, pains, &c. are really of a venereal nature; I mean, whether they owe their origin really to the venereal poiſon, or rather to ſome other cauſe widely different; or, *ſecondly*, whether they are the effects of mercury; or, what is perhaps of the greateſt conſequence, *thirdly*, whether, from having been originally owing to the venereal virus, they now, by time or other circumſtances with which we are not yet ſufficiently acquainted, have changed their nature. In which caſe, inſtead of yielding

ing to the power of mercury, they ſeem to be not only in every degree exacerbated by that remedy; but likewiſe, if its uſe be imprudently inſiſted on, will at laſt prove fatal to the patient. In proof of this, I have adduced, under the above mentioned heads, ſeveral ſtriking, and, as I think, convincing inſtances. And thoſe of my readers who are particularly intereſted in this ſubject may find a good many more in *Mr. Fabre's Supplement to his Treatiſe on the Venereal Diſeaſe*. I now proceed to the conſideration of thoſe medicines which I have hitherto found moſt efficacious in removing theſe dreadful and obſtinate complaints.

To diſtinguiſh complaints ariſing from mercury from real venereal ones, great judgment is often required. I have ſeen patients who complained of rheumatic pains, pains of the bones, headachs, ſpaſms in different parts, and trembling of the extremities, &c. owing, as they thought, to the enormous quantity of mercury they had taken; whom, however, after a careful inquiry, I have effectually cured by giving them more mercury; becauſe I found that the obſtinacy of their preſent complaints, though really venereal, was owing to an improper preparation of mercury made uſe of, or to a proper preparation improperly adminiſtered; which being evacuated by ſtool, ſalivation, or immoderate ſweats, as faſt as it was given, thereby, though taken for a great length of time, and in conſiderable quantities, could never exert its proper effect upon the poiſon lodged in the body.

Diseases are often incurable by mercury, on account

count of their miſtaken nature. I have obſerved above, that claps, ulcers, and buboes, may, and do often ariſe from a cauſe very different from the venereal; and that, in this caſe, they are not unfrequently miſtaken by ſuperficial practitioners for venereal complaints, where there never was as much as a ſhadow of any ſyphilitic poiſon in the caſe. It is, therefore, no wonder, that they find, in ſuch inſtances, all the mercurial preparations, tried often one after the other, prove, if not hurtful or fatal, at leaſt perfectly uſeleſs to the patient. I have mentioned under the different heads, how thoſe complaints are to be diſtinguiſhed and treated; and therefore find it ſuperfluous to repeat any thing further about them.

THERE are diſeaſes which ariſe from ill-treated claps or gleets, and prove obſtinate and incurable till we bring on a running. In thoſe caſes, where the diſeaſe is not of a venereal nature, but owing, as is not unfrequent, to the effects of mercury, inſtead of following the general routine of practice, to give new mercurial preparations, after two or more of them have been already tried in vain, we muſt endeavour to counteract and deſtroy thoſe effects. This is moſt effectually done by the internal uſe of purified ſulphur, commonly called flowers of ſulphur, and by repeated warm baths, and flannel dreſs, taking at the ſame time proper care to keep up the vigour and ſtrength of the body by a good nouriſhing diet, wine, and ſtrengthening medicines, if required. The ſulphur of antimony, with the reſin of guaicum along with the warm bath, will, in theſe inſtances, be eſpecially

pecially uſeful, where the ſymptoms have been brought on by catching cold.

Those complaints which are neither owing to the venereal virus nor to the effects of mercury, but which, though originally venereal in the beginning, having by time, by the uſe of mercury, and other circumſtances, changed their nature, reſiſt now the one as well as the other of the methods juſt before recommended. In theſe caſes, it is often beſt to leave off for a time all medicines whatever: change the low diet for an invigorating and ſtrengthening one, and the confined air of a town-room for the healthy country air, eſpecially at the ſea-ſide. If medicines are to be given, the tonics or ſtrengthening ones are thoſe from which we have moſt to expect. Under this claſs I principally reckon antimonials, and more eſpecially, in the caſes alluded to, chalybeates. But, when ſpeaking of the uſe of thoſe medicines, I would not be underſtood to preſcribe them in the quantity of a few grains as uſually given, but in much larger doſes. The preparations I generally make uſe of are, the crude antimony, the æthiops martialis, and more eſpecially a tincture made of iron and vitriolic ether. Of theſe I adminiſter ſuch doſes as the conſtitution of the patient will bear, either alone or united, according to circumſtances, with the decoctions of ſarſaparilla, the Peruvian bark, or walnuts. The ſulphur of antimony, united with the extract of hemlock, will be ſometimes very ſerviceable, alone or with a decoction of ſarſaparilla with the mezereum root, and the uſe of warm baths. Sometimes the cold bath, and eſpecially bathing in the

ſea, will greatly contribute to the effect of the above medicines.

From the decoctum Luſitanicum I have ſeen, in ſeveral inſtances, evident good effects. But of all the remedies hitherto recommended for venereal complaints incurable by mercury, I have ſeen none equal to a decoction made uſe of by Dr. *Paullini*, phyſician at Laybach in Carniolia. With this decoction, the moſt malignant and obſtinate ulcers, cutaneous diſorders, tophus, caries, pains of the bones and other parts of the body, ariſing from a venereal cauſe, which reſiſted the power of all other medicines preſcribed by different phyſicians in different climates, have been effectually cured; and what is ſtill more remarkable, for the moſt part, in a very ſhort ſpace of time. It is, however, much to be regretted that this remedy cannot become of more general uſe, nobody having been hitherto able to prevail upon him to make it public.

CHAP.

CHAP. XX.

Of the Reaſons why certain VENEREAL COMPLAINTS *do not yield to* MERCURY.

THE reaſons practical obſervations have ſuggeſted to me why mercury ſometimes fails in curing venereal complaints, depend on the following cauſes; viz. 1. On mercury and its preparations. 2. On the method of exhibiting the ſame, internally as well as externally. 3. On the greater or leſs irritability or conſtitutional ſtrength of the patient, or ſome faults commited by the ſame. 4. On the nature of the diſeaſe itſelf.——I ſhall treat of them in order.

CONCERNING the *firſt* and *ſecond* point: Since the uſe of mercurial ointment in frictions, the firſt and only method made uſe of in the ſixteenth century, ſeveral other preparations, both for internal and external uſe, have been diſcovered and tried, with a view to cure venereal complaints which would not yield to frictions, or to remove the diſeaſe more ſpeedily, or in a more convenient manner. I ſhall avoid making here any reflections on the preference which either of thoſe methods may claim over the reſt; and ſhall here confine myſelf entirely to the reaſons why mercurial frictions, as well as other preparations of mercury, ſometimes prove ineffectual for removing ſome venereal complaints, having offered the neceſſary obſervations on theſe preparations before.

I HAVE ſeen a variety of perſons affected with gleets, ſhankers, pains and caries of the bones, cutaneous eruptions, herpes, ulcerations of the noſe, throat, &c. condylomatous or verrucous excreſcences in different parts of the body, but eſpecially about the anus and pudenda, which ſeemed obſtinately to reſiſt the effects of mercury; and which, ſo far from being removed by a copious and diſagreeable ſalivation, were rather increaſed by it, and, when removed, often returned again ſhortly afterwards.

AFTER a careful inquiry, I found that the cauſes of this difficulty are frequently to be ſought for in the medicine itſelf; being owing, either, *1ſt*, To its being badly prepared, or ill fitted for curing the diſeaſe. *2dly*, To its not having been given in a ſufficient quantity, or continued for a ſufficient length of time. And, *3dly*, To its being adminiſtered in too great a quantity, and by that means exciting a ſalivation, ſweats, and purging, without deſtroying the venereal virus in the body.

THE great point in curing the venereal diſeaſe by means of mercury, being to introduce ſuch a quantity of it into the habit as ſhall be ſufficient totally to eradicate the venereal poiſon, it is evident that medicines unſkilfully or negligently prepared, may have the worſt effects, or no effect at all. Thus, for example, if ſublimate be mixed with arſenic, in order to render it whiter, and give it a better appearance, or if mercury be combined with ſubſtances incapable of holding it ſuſpended, or if, when made into pills, it be not ſufficiently triturated, ſo as to be equally divided, its effects cannot be but precarious. In the latter

latter caſe, one pill may contain three or more grains of mercury, and another only one grain, or perhaps none at all; and when this is the caſe, the latter will have no effect, while from the former, the patient may experience a violent griping, purging, &c.

HERE we may obſerve, that a mercurial preparation is always ill fitted for the purpoſe, whenever it is incapable of entering into the habit, or if, when it has entered the circulation, it excites a ſalivation before it has deſtroyed the virus: for it is erroneous to believe, as I mentioned above, that by a ſalivation all the poiſon is carried off, and the diſeaſe by that means radically cured, juſt the contrary to this being often the caſe. It is true, that if a ſalivation is brought on, the patient will often find all his ſymptoms diſappear, and of courſe be induced to think himſelf cured; but ſome months, nay ſometimes only a few weeks afterwards, the complaints in many caſes will return again with increaſed violence. I do not deny, however, but that the diſeaſe, eſpecially if ſlight, may by this means be radically cured: but I maintain, from repeated obſervations in private as well as hoſpital practice, that the practitioner can never be certain of a real cure; and of courſe, that the cures effected by ſalivation are not only doubtful, but oftentimes altogether ineffectual. But upon this ſubject I have already ſpoken more fully in the foregoing chapter.

THE principal remark to be made here is, that to cure the lues well and radically, no practitioner who has the welfare of his patients at heart, and who does not

not chuſe to adminiſter his medicines at random, will ever make uſe of any mercurial preparation or compoſition which he has not prepared for himſelf, or, at leaſt, taken care to ſee the ſame prepared by ſome perſon on whoſe integrity and care he can rely. The repeated diſappointments I have experienced myſelf, and which I have ſeen happen to others, have rendered me ſcrupulouſly exact on this head.

We ſhould likewiſe be careful not to make uſe of mercurials combined with medicines, which may render the former leſs efficacious; becauſe they not only diſappoint us, but often render the cure more tedious and precarious. I have ſeen repeated inſtances of this with Plummer's pills; and have heard the ſame remark made by other attentive and eminent practitioners.

We ought never to give acrid preparations of mercury when we can effect a cure with mild ones. The dreadful effects I have repeatedly been an eye-witneſs to, from remedies of this ſort, eſpecially from the corroſive ſublimate, oblige me to inculcate this caution with the greater warmth. The conſtant effects of ſuch acrid compoſitions, eſpecially in delicate habits, are pains in the ſtomach and bowels, loſs of appetite, violent gripings, diarrhœas, and ſometimes dangerous cholics; or, if they enter into the maſs, they excite ſpitting of blood, convulſions, nervous fevers, and other complaints, more baneful even than the diſeaſe they were intended for to eradicate; or elſe they will perhaps excite a ſalivation, and of courſe prevent from being continued to complete the cure.

If

If we ſometimes adminiſter them, as may now and then be requiſite in cutaneous or deep-ſeated venereal complaints, we ſhould carefully conſider the habit of the patient; and if that appears to admit of them, begin with very ſmall doſes, in order to avoid the above-mentioned ſymptoms, particularly the diarrhœa; for when that takes place, the mercury, inſtead of entering into the maſs, will be carried off by ſtool, and of courſe occaſion trouble and pain to the patient, without affording him any relief. In general, therefore, we ſhould be careful in the choice and adminiſtration of mercurial preparations: we ſhould find out, in every caſe, that preparation which ſeems beſt to agree with the conſtitution, and never inſiſt obſtinately on the uſe of a preparation or doſe which excites bad ſymptoms in the body: we ſhould not imitate the example of thoſe quacks whoſe knowledge conſiſts entirely in a noſtrum, which they give indiſcriminately to all their patients, for every kind of venereal complaint, and pronounce their patients cured as ſoon as the ſymptoms of the diſorder have diſappeared; to which aſſertion, credit is the more readily given, as moſt young men diſlike to be conſtrained or confined to a courſe of medicines for a length of time. Thus they will now and then cure a patient; but in the mean time ruin the conſtitution of many, and commonly render the diſeaſe more obſtinate and inveterate for the future. The poiſon indeed remains latent for weeks, months, or ſometimes even for years: but then it breaks out with redoubled rage and violence, and not unfrequently produces ſymptoms and diſeaſes, the nature of which, eſpecially in women, we muſt only gueſs, and which, in

that

that ſtate, ſometimes baffle the ſkill of the moſt able phyſician; for, venereal complaints, the older they are, the more obſtinate they prove againſt the power of mercury.

I COME now to the *third* point, why mercury proves unſucceſsful in curing the lues, viz. on account of the conſtitution of the patient, &c. We ſometimes meet with patients, eſpecially among the female ſex, or ſuch as have taken mercury for former venereal complaints, whoſe conſtitution is now ſo irritable, that after the adminiſtration of a few grains or a few frictions, they are either affected with a nervous fever, ſpaſms, headach, or they very readily fall into a ſalivation on the ſecond or third day. In theſe conſtitutions we ought to be peculiarly careful to find out the preparation and doſe beſt adapted to them. The Peruvian bark, or ſome other vegetable tonic, is here ſometimes adminiſtered with mercury to great advantage. By the neglect of theſe precautions many patients of this kind will be ſufferers for life, without ever being cured radically. There is one remark to be made here, to which in general little attention has been hitherto paid. Moſt writers and practitioners confine their venereal patients under a mercurial courſe, without any diſtinction to a low diet, as well with regard to eating as drinking. This rule is, however, a very improper one when generally applied. Such a diet will be very proper for ſtrong, vigorous conſtitutions; but for weak, delicate, or irritable ones, it is ſometimes highly improper. A full diet, with the moderate uſe of wine, ought to be allowed to them; otherwiſe mercury will produce no effects upon

upon the poiſon, though very diſagreeable ones upon the conſtitution. The warm bath will ſometimes much aſſiſt in theſe caſes. Nature readily co-operates with mercury in ſome conſtitutions: whereas in others it does but little, or acts ſlowly, and with difficulty. But beſides this peculiarity in the conſtitution, we often obſerve, that patients render their complaints complicated and obſtinate, by attempting to cure themſelves, or by applying to quacks, or unſkilful perſons in the art of healing. They frequently alſo hurt themſelves by neglect of diet, or by not making uſe of the medicines in the manner preſcribed, or by not continuing the ſame long enough, but leaving off as ſoon as the ſymptoms diſappear, by expoſing themſelves imprudently to the damp and cold atmoſphere, eſpecially at night; or when they grow impatient and inconſtant, going from one phyſician to another, or making uſe for ſome days or weeks of one medicine and then of another. By all theſe different circumſtances, venereal complaints are often rendered extremely obſtinate.

Mercury likewiſe ſometimes fails, when the patient, by a previous large or imprudent uſe of mercury, can hardly bear a few grains or a few frictions without ſalivation: in this caſe, if we leave off the uſe of mercury, our patient will not get rid of his diſorder; and if we continue it, we are ſure to bring on a troubleſome ptyaliſm, which will laſt ſometimes for weeks or months, expoſing the patient to dangerous conſequences, and often leaving the principal diſorder uncured. What ought to be done in theſe circum-

ſtances, I have hinted in ſeveral places of the foregoing chapters.

But we are, *fourthly*, by far more frequently diſappointed in our expectations from mercury, by miſtaking the nature of the diſorder, by judging thoſe complaints venereal which never were venereal, or which often are owing either to the effects of mercury, or to a ſtate of the diſorder, which, though originally ariſing from the venereal virus, has degenerated, either by time or other cauſes, into a diſeaſe of a quite different nature, for which mercury is not only no antidote, but a real poiſon. Of theſe complaints we have ſpoken already, and ſhall have occaſion to ſpeak further hereafter.

CHAP.

CHAP. XXI.

On different other REMEDIES, *beſides* MERCURY, *recommended for curing the* LUES.

BESIDES the mercurial frictions, the fumigations, and the internal uſe of the different mercurial preparations, a variety of other medicines has been recommended, either to cure the different venereal complaints without mercury, or to aſſiſt mercury in its operation; and as there are inſtances where the mercury fails, or where patients by its uſe are expoſed to diſagreeable conſequences, a remedy has long been ſought for, which, without having any of the noxious qualities of mercury, might have all its powerful and good ones.—Moſt of the quack medicines, ſold and praiſed as preparations from the vegetable kingdom for this purpoſe, I have been at pains to analyze, and have found them generally to be nothing but one or other mercurial preparation diſguiſed.

SEVERAL remedies have been recommended as ſuccedaneums for mercury for the cure of the venereal diſeaſe, which have been made uſe of for this purpoſe, we are told, with ſucceſs, before or ſince mercury was introduced. Some, we are credibly informed, are even at this time actually employed with the beſt effect, in South as well as in North-America, for curing the venereal diſeaſe radically without mercury. Such of them as I have ſeen made uſe of for the ſame purpoſe in Europe, have generally failed; and I have

never ſeen yet one inſtance of a confirmed pox radically cured without mercury. Some of them, however, are worthy of our attention, and certainly deſerve a fairer trial than has hitherto been beſtowed on them, in order to aſcertain their power, eſpecially ſuch as are recommended by men of knowledge and obſervation. The root of the *Lobelia ſyphilitica*, with which, as we are inſtructed by Dr. Kalm, and afterwards more exactly by Mr. Bartram*, the inhabitants of North America cure the venereal diſeaſe as effectually and radically as we do with mercury. They take a handful of the freſh, or (which he ſays is better) dried plant; they waſh it, and boil it in a gallon and a half of water; of which decoction the patient drinks every day, if his conſtitution will ſuffer it, a quart in the beginning, gradually augmenting the doſe, till he can no longer bear the purging excited by it; then he leaves it off for a day or two, and, if neceſſary, continues it again till he finds himſelf perfectly well, which is for the moſt part in a fortnight. If there are any external diſorders, they waſh the affected parts with the ſame decoction.—If the diſeaſe is very obſtinate, they mix with the lobelia, the root of the *Ranunculus abortivus*, but in a ſmall

* The latter author adviſes the patient to take two gills of this decoction three times a-day on an empty ſtomach, and augment the doſe according to the ſtrength of the patient, making uſe of warm baths, and a proper diet at the ſame time. Care ſhould be taken not to make uſe of the lobelia longiflora inſtead of the lobelia ſyphilitica, the former being of a much more acrid nature than the latter.—In ſome parts of Italy it is even now a law of government, not to make uſe of mercury in hoſpitals for curing the venereal diſeaſe.

ſmall quantity on account of its acrimony. In order to heal up the venereal ulcers, they dry the root of *Geum nivale*, and ſprinkle its powder upon them. They alſo cure deep and putrid ulcers, by the external uſe of the powder of the interior bark of the *Ceanothus Americanus*. A decoction of the ſtipites of the *Solanum dulcamara*, or of the root of the *Daphne mezereum*, or *Daphne laureola*, and more eſpecially the powder of *Sarſaparilla* in large doſes, have been of late much recommended in obſtinate venereal complaints; but how far their operation ſucceeds without the previous uſe of mercury, is not yet aſcertained.

In South America, and in the Weſt Indies, the decoction of the woods of guaiac, ſaſſafras, &c. is praiſed as a remedy, with which alone the moſt confirmed lues may be eaſily cured. It may be that venereal complaints are thereby removed between the tropics, and in the warmer climates of our globe; but in Europe I have never ſeen one caſe where they effected a radical cure; but ſometimes rather prove hurtful, producing profuſe ſweats, hæmoptyſis, conſumptions, &c. eſpecially in delicate and thin habits. —Several complicated preſcriptions are made uſe of, and greatly praiſed, though generally kept ſecret, ſome of which I have inſerted at the end of this Treatiſe in the formulas.

My friend Dr. *Wintrel*, Profeſſor of Botany at Buda in Hungary, diſcovered lately, that the inhabitants in the confines of Turkey cured themſelves of the lues in all its ſtages by a decoction of the *Aſtragalus exſcapus*.—

exſcapus.—The inſpiſſated juice of the *Papaver ſomniferum*, known under the name of Opium, by ſucceſſive increaſed doſes from one to twelve or ſixteen grains in a-day, firſt propoſed for a trial by Dr. *Nooth*, as I mentioned above, has proved very ſucceſsful in the Great Military Hoſpital at New York. But how far all theſe medicines, as I ſaid juſt before, do or may ſucceed without mercury, I am not able to decide. So much it ſeems to be certain, that the lues is in general much eaſier cured in warm climates, when properly treated, than in cold ones. A decoction of the bark of *Prunus Padus* has been lately found very efficacious, eſpecially when joined with the uſe of mercury, in many violent and inveterate venereal complaints, by Dr. Biornlund, Phyſician in Sweden; and an account of them has been inſerted in the Swediſh Philoſophical Tranſactions for 1784.

White arſenic mixed with the powder of the root and berries of the *Solanum lethate*, one grain of the former to thirty-nine grains of the latter, have been of late found very uſeful in obſtinate phagedenic ulcers, attended with fungous fleſh and callous edges, by Dr. *Ruſh*, Profeſſor of Chemiſtry at Philadelphia; he alſo recommends a weak ſolution of white arſenic in boiling water for the ſame purpoſe. And Mr. *Blizard* has publiſhed lately in London ſome Practical Obſervations, where he employed emetic tartar in powder, ſprinkled upon phagedenic ulcers, with great ſucceſs; the acrid ichorous diſcharge being thereby changed into mild pus, the ulcers ſoon put on a good appearance, and healed up.

CHAP.

CHAP XXII.

OBSERVATIONS *on ſome dangerous or unhappy Prejudices generally prevailing about the Venereal Diſeaſe.*

IT is an opinion imbibed by ſome patients, that the venereal poiſon, when once abſorbed into the ſyſtem, can by no means be totally eradicated; conſequently they believe, that a perſon who is once thoroughly infected, can never look upon himſelf as radically cured. This opinion, beſides its abſurdity, renders thoſe who entertain it very unhappy. I have ſeen frequent inſtances, in the female ſex eſpecially, where ſuch patients led a moſt miſerable and melancholy life, notwithſtanding every thing the phyſician could ſay to the contrary. The leaſt ſhadow of a headach, a rheumatic pain, or the ſmalleſt pimple upon the ſkin, were by ſuch patients accounted certain proofs of the poiſon lurking in the maſs, and about to produce the moſt direful effects. Theſe patients are real objects of compaſſion; we ought to beſtow ſome time for inquiry, and pay the moſt careful attention towards them; for indeed we can hardly think of a greater degree of miſery than to be perpetually haunted with ſuch an imagination. If, therefore, after our moſt careful inquiry, we find no ſymptoms of a venereal kind remaining, we ſhould endeavour to correct their prejudice, by ſetting before them the examples of others of their acquaintance, or, if circumſtances admit, of thoſe of our own, who have been affected as much as themſelves, or perhaps much more, and who now, perhaps, after a great number

of

of years, enjoy the moſt perfect ſtate of health, are married, and have healthy and fine children.

The ſame attention we ought to pay to thoſe who imagine, that if mercury is once taken for the cure of the lues, it will not ſo effectually cure it a ſecond time. Theſe prejudices are moſt frequently found among the women, though ſometimes alſo men of a melancholic conſtitution will be influenced by them; but there is another prejudice of which I am now to ſpeak, which is not only abſurd but criminal, and deſerves a moſt ſevere puniſhment from the magiſtrate wherever it can be proved. It exiſts only among ſome young men of a looſe character, and diſſolute and brutal manner of thinking. With theſe wretches it is an opinion, that the beſt method to get rid of a clap is coition with one or more healthy women; and in this manner I have ſeen venereal complaints propagated, in the courſe of a few days, to ten or twelve healthy perſons, who had the misfortune to fall in with thoſe wretches, or with the objects of their brutality and cruelty. The abſurdity of this notion is evident to every perſon of common ſenſe, who has the leaſt knowledge of the nature and ſeat of the diſeaſe; and where this practice ariſes merely from prejudice, the ſlighteſt information will be ſufficient to remove it. But it is to be feared, that the cauſe may frequently lie deeper in the heart of theſe perſons; and that this abominable practice proceeds from malignity, or from a mean and low diſpoſition to revenge themſelves upon innocent perſons, becauſe in their imprudence or drunkenneſs they themſelves had become the dupes of others.

Phar-

Pharmacopœia Syphilitica.

So modern 'Pothecaries taught the art
By Doctors bills, to play the Doctor,s part;
Bold in the practice of miſtaken rules,
Preſcribe, apply, and call their maſters fools.

Garth's Diſpenſary.

LECTORI.

En ſpecimen Pharmacopœiæ Syphiliticæ, complectens medicamenta pleraque, ſi non omnia, tam ſimplicia quam compoſita, ad curandos morbos ſyphiliticos hodie adhibita. Nomina plantarum et præparatorum chemicorum antiqua, minus congrua, impropria, aut falſam penitus rei ideam ſuggerentia, confuſione fertilia, genio ſæculi indigna expunxi, mutavi. Cur enim Gallimachiam nominum chemicorum veterem retineas, dum exactior corporum analyſis, ac nomenclatura Bergmani rei veritati magis congrua ſuppeditat? Cur nomina plantarum pharmaceutica vaga adhibeas, dum nomen ſyſtematicum Linnæi, ad quem pro juſta plantæ deſcriptione ſemper recurras, in promptu habes? Memoriæ tyronum hoc modo æque ac tuæ parceres, et poſteritati (ſiquidem liber tuus ab ea legi meretur) prodeſſes, difficultatem removendo, qua tu quidem legendo veteres præcipue, et non raro etiam recentiores, continuo premeris. Si Hippocrates, ſi alli poſt eum in medicina ſcriptores id obſervaſſent, id obſervare potuiſſent, ſciremus hodie, quid ille ſub ſuo Helleboro, quid alli ſub plantis ſuis aut preparatis chemicis ſæpe adeo, nec forſan immerito, laudatis intellexerint.

I. SIM-

I. SIMPLICIA.

Ex regno Vegetabili,

Aconitum Napellus (Herba, extractum)
Offic. *Aconitum;* Anglis, *Wolfsbane;* Germanis, *Blauer Sturmbut;* Gallis, *Chaperon de Moine.*

Anemone Pratensis (Herba extractum).
A. *Windflower;* Ge. *Windblume;* G. *Paſſefleurs.*

Arctium Lappa (Radix).
Off. *Bardana;* A. *Burdock root;* Ge. *Klettenwurzel;* G. *Bardane.*

Astragalus Exscapus (Radix).

Atropa Mandragora (Radix).
Off. *Mandragora;* A. *Mandrake;* Ge. *Alraun;* G. *Mandragore.*

Balsamum Canadense, ex Pinu Balsamea.
A. *Canada Balſam.*

Balsamum Copaivæ, ex Copaifera officinali.
A. *Balſam of Copaiva;* Ge. *Copaiva Balſam;* G. *Baume Copaive.*

Balsamum Peruvianum, ex Myroxylo Balsamifera.
A. *Balſam of Peru;* Ge. *Peruvianiſcher Balſam;* G. *Baume de Perou.*

Cannabis Sativa (Semina).
A. *Hempſeed;* Ge. *Hanfſaamen;* G. *Semences du Chauvre.*

Ceanothus Americanus (Cortex interior; Radix).
A *New Jerſey Tea;* Ge. *Ceanothus.*

Cinchona Officinalis (Cortex).
Off. *Cortex Peruvianus*; A. *Peruvian Bark*; Ge. *Fiberrinde*; G. *Kinkina*.

Clematis Recta (Folia).
Off. *Flammula Jovis*; A. *Upright Lady-bower*; Ge. *Waldrebe*; G. *Clematite*.

Conium Maculatum (Herba, Folia, extractum).
Off. *Cicuta*; A. *Hemlock*; Ge. *Schierling*; G. *Ciguë*.

Daphne Laureola
——— Mezereum } Radix, et Cortex radicis.
Off. *Mezereum*; A. *Mezereon*; Ge. *Seidelbaſt*; G. *Garou*.

Geum Nivale (Radix).

Glycyrrhiza Glabra et Echinata (Radix; ſuccus inſpiſſatus, *vulgo* extractum).
Off. *Liquoritia*; A. *Liquorice*; Ge. *Süsſholz*; G. *Regliſſe*.

Guajacum Officinale (Lignum, Cortex, Reſina).
Off. *Lignum Sanctum*; A. *Guajac*; Ge. *Franzoſenholz*.

Gummi Mimosæ Niloticæ, vel Mimosæ Senegal.
Off. *Gummi Arabicum*; A. G, *Gum Arabic*; Ge. *Arabiſcher Gummi*.

Hyosciamus Niger (Extractum).
A. *Black Henbane*; Ge. *Bilſenkraut*; G. *Juſquiame*.

Juglans Regia (Nux cum Cortice viridi, ejuſque extractum).
Off, *Nux Juglans*; A. *Walnut*; Ge. *Walnuſs*.

Juniperus Sabina (Folia).
Off. *Sabina*; A. *Savin*; Ge. *Sevenbaum*; G. *Sabine*.

Laurus Sassafras (Lignum, Cortex, Radix).
Off. A. Ge. G. *Saſſafras*.

Ledum

Ledum Palustre (Folia cum Floribus).
Off. *Roſmarinus Sylveſtris*; A. *Bohemian Roſemary* or *Hilroſe*. Ge. *Wilder Roſmarin*; G. *Roſmarin Sauvage*.

Lobelia Syphilitica (Radix).

Malva Rotundifolia (Herba, Folia).

Ononis Spinosa (Radix).
Papaver Somniferum (Succus inſpiſſatus).
Off. A. G. *Opium*; Ge. *Mohnſaft*.

Prunus Padus (Cortex).

Ranunculus Abortivus (Radix).

Saponaria Officinalis (Folia Herba).
A. *Soapwort*; Ge. *Seifenkraut*; G. *Saponaire*.

Smilax Sarsaparilla (Radix).
Off. A. Ge. *Sarſaparilla*; G. *Salſepareile*.

Solanum Dulcamara (Stipites).
Off. *Dulcamara*; A. Bitterſweet; Ge. *Bitterſüiſs*; G. *Morelle Grimpante*.

Terebinthina Larigna, ex Pinu Larice.
Off. *Terebinthina Veneta*; A. *Venetian Turpentine*; G. *Terpentin*; G. *Terebintine*.

Tormentilla Erecta (Radix).
A. *Septfoil*; Ge. *Birkwurzel*; G. *Tormentille*.

Ex Regno Animali.

Hirudo Medicinalis.
A. *Leeches*; Ge. *Blutigel* G. *Sangſuë*.

Lac Humanum, aliorumque Animalium.

Melde

Meloe Vesicatorius (Emplaſtrum, Tinctura).
Off. *Cantharis*: A. *Cantharides*; Ge. *Spaniſche Fliegen*; G. *Mouche Cantharide.*

Ex Regno Minerali.

Antimonium ſeu Stibium.

Antimonium Sulphuratum.
Off. *Antimonium Crudum*; A. *Antimony*; Ge. *Spieſsglaſs*; G. *Antimoine.*

Præparat. Sulphur Antimonii.

Antimonium Muriatum.
Off. *Butyrum Antimonii*; ſ. *Cauſticum Antimoniale.*

Argentum.

Præparat. Argentum Nitratum.
Off. *Lapis infernalis, Cauſticum lunare*; A. *Lunar Cauſtic*; Ge. *Hœllenſtein*; G. *Pierre infernal.*

Arsenicum Calcinatum.
Off. *Arſenicum Album*; A. *White Arſenic.*

Cuprum.

Præparat. Cuprum Acetatum.
Off. *Ærugo*; S. *Viride Æris*; A. *Verdegris*; Ge. *Grünſpan*; G. *Verd de gris.*

Cuprum Vitriolatum.
Off. *Vitriolum Cupri*; ſ. *Cyprinum*; ſ. *Cœruleum*; A. *Blue Vitriol*; Ge. *Kupfer-Vitriol*; G. *Vitriol de Cuivre.*

Aurichalcum (Pulvis).

Ferrum.

Præparat.

Præparat. Ferri Limatura.

Calx Ferri Nigra. Off. *Æthiops Martialis.*

——— rubra. Off. *Ochra.*

Ferrum Muriatum.
Off. *Flores Salis Ammoniaci Martiales.*

Ferrum Saccharatum. Off. *Mars Saccharatus.*

Ferrum Tartarisatum.

Ferrum Vitriolatum. Off. *Vitriolum ferri, Sal Martis.*

PLUMBUM.

Præparat. Calx Plumbi; seu Plumbum Calcinatum.
Off. *Lithargyrum*; A. G. *Litharge*; Ge. *Bleyglætte.*

Plumbum Acetatum.
Off. *Saccharum Saturni*; A. *Sugar of Lead*; Ge. *Bleyzucker.*

Calx Plumbi Acetata. Off. *Cerussa.*

Acetum Plumbatum.
Off. *Acetum Saturni*; s. *Lithargyri*; s. *Extractum Saturni*; s. *Extractum Goulardi.*

ZINCUM.

Præparat. Calx Zinci.
Off. *Tutia Præparata*; s. *Lapis Calaminaris.*

Calx Zinci Sublimata; s. Zincum Calcinatum
Off. *Flores Zinci.*
Zincum Vitriolatum.

Off.

Off. *Vitriolum Zinci*; ſ. *Album*; A. *White Vitriol*; Ge. *Zink-vitriol*; G. *Vitriol de Zinc.*

Hydrargyrum, ejuſque Præparata varia, in Tabula ſequenti exhibentur.

TABULA exhibens diverſa, ex Hydrargyro Præparata et Composita, hactenus cognita †.

I. Hydrargyrum simpliciter purificatum.

* Hydrargyrum purificatum.
A. *Quickſilver, crude purified mercury*; Ge. *Reines queckſilber*; G. *Mercure pure.*
Syn. Mercurius crudus purificatus *officinarum.*
Argentum vivum purificatum.

II. Præparata in quibus Hydrargyrum solummodo divisum esse videtur.

1. Decoctum Hydrargyri, i. e. Hydrargyrum ſimpliciter in aqua coctum.

2. Extracto Glycyrrhizæ ſubactum.

3. Gummi aut mucilagine, e. g. Gummi Arabico, Tragacanthæ, &c.

* Hydrargyrum gummoſum.
Syn. Mercurius gummoſus, inventore *Plenck.*

Composita.

† Litteræ, quibus præparata et compoſita notantur, ſignificant: O. Officinarum; L. Pharmacopoea Londinenſis; S. Pharm. Suecica; D. Pharm Danica; E. Pharm. Edinburgenſis; B. Diſpenſatorum novum Brunſwicence; E. *paup.* Pharm. Edinburgenſis pauperum; T. Pharm. Noſocomii Sti. Thomæ Londinenſis; G. Pharm. Noſocomii Sti Georgii Londinenſis.

Composita.

* α Pilulæ ex hydrargyro gummoſo.
Syn. Pilulæ ex mercurio gummoſo. *Plenck. Pharm. Chir.*
β Solutio mercurialis gummoſa. *Ibid.*
Syn. Mixtura mercurialis. *G.*
γ Potio mercurialis. *B.*
δ Lac mercuriale. *Plenck.*

4. Reſina aut Balſamo; e. g. Terebinthina, Balſamo Copaivæ, &c.
* Hydrargyrum terebinthinatum, &c.

Composita.

* Pilulæ ex hydrargyro terebinthinato.
Pilulæ mercuriales. *L.*
Pilulæ mercuriales laxantes. *G.*
Pilulæ mercuriales ſialagogæ. *D.*
Injectio mercurialis. *E. paup.*

5. Pinguedine animali aut oleis unguinoſis; e. g. Axungia porcina anſerina; butyro Cacao.
* Hydrargyrum unguinoſum.
* Unguentum hydrargyri. Vid. infra *Hydrargyrum Sebinum.*
Syn. Unguentum ex hydrargyro cœruleum. *E.*
Unguentum mercuriale, ſeu unguentum Neapolitanum.

Composita.

α Unguentum cœruleum fortius. *L.*
Unguentum cœruleum mitius. *L.*
Unguentum mercuriale. *D.*
β Ceratum mercuriale. *L.*
γ Emplaſtrum mercuriale. *O.*
Emplaſtrum ex hydrargyro. *E.*
Emplaſtrum ex gummi ammoniaco cum mercurio. *L.*

Emplaſtrum commune cum mercurio. *L.*
Emplaſtrum de ranis cum mercurio.

6. Terra Calcarea; e. g. Creta, Lapidibus aut Chelis cancrorum, &c.
Mercurius alkaliſatus. *E.*
Pulvis mercurialis. *G.*

III. Præparata in quibus Hydrargyrum, mediante igne et libero aeris accessu, in calcem vertitur.

* Hydrargyrum calcinatum.
Syn. Mercurius calcinatus. *L. S.*
Mercurius præcipitatus per ſe. *L.*

Composita.

* Pilulæ ex hydrargyro calcinato.
Pilulæ ſyphiliticæ.
Pilulæ ex mercurio calcinato. *G.*
Pilulæ ex mercurio calcinato anodynæ. *G.*

IV. Præparata in quibus Hydrargyrum partim divisum, partim solutum esse videtur.

1. Saccharo, Manna, Conſerva Roſarum, Cynoſbati, &c,
* Saccharum hydrargyratum.

Composita.

* Trochiſci ex hydrargyro ſaccharato.
Bolus cœruleus. *T.*
Bolus mercurialis. *G.*
Syrupus Hydrargyri. *S.*
* Mel hydrargyratum.

Composita.

Pilulæ Æthiopicæ. *E.*
Pilulæ mercuriales purgantes. *E. paup.*
Pilulæ Belloſti.

3. Sulphure

3. Sulphure purificato.

* Hydrargyrum ſulphuratum.

a Trituratione aut fuſione.

* Hydrargyrum ſulphuratum nigrum.

Æthiops mineralis. *O.*

Composita.

Pulvis Æthiopicus. *G.*

b Sublimatione.

* Hydrargyrum ſulphuratum rubrum.

Cinnabaris factitia, ſeu artificialis. *O.*

Composita.

Pulvis antilyſſus Sinenſis. *O.*

c Præcipitatione. Vid. infra *Hydrargyrum vitriolatum.*

4. Sulphure Antimonii.

a Trituratione.

* Sulphur antimonii hydrargyratum.

Æthiops antimonialis. *O.*

Composita.

Pilulæ Æthiopicæ. *E. D.*

b Sublimatione.

Sulphur antimonii hydrargyratum rubrum.

Syn. Cinnabaris antimonii. *O.*

Composita.

Bolus Cinnabarinus. *G.*

V. Preparata in quibus Hydrargyrum mediante acido in formam salis aut calcis mutatum est.

1. Acido Sebi. 2. Acido Muriatico. 3. Acido Sacchari. 4. Acido Succini. 5. Acido Arſenici. 6. Acido Acetoſellæ. 7. Acido Phoſphori. 8. Acido Vitrioli. 9. Acido Sacchari Lactis. 10. Acido Tartari. 11. Acido Citri. 12. Acido Nitri. 13. Acido Fluoris Mineralis. 14. Acido Aceti. 15. Acido Boracis. 16. Acido cæruleï Berolinenſis. 17.

Acido Molybdænæ. 18. Acido Tungſtenico. 19. Acido aëreo.

I. *Hydrargyrum cum acido ſebi combinatum.*
Hydrargyrum ſebinum.
* *Præp.* Unguentum hydrargyri.

II. *Cum acido muriatico.*
* Hydrargyrum muriatum.
* *Hydrargyrum muriatum fortius.*
A. Sublimatione.
* Hydrargyrum muriatum fortius ſublimatum.
Syn. Mercurius ſublimatus corroſivus.
Mercurius ſublimatus albus. *O.*
Mercurius cum ſale ammoniaco ſublimatus.
B. Præcipitatione.
Ex acido nitri mediante acido muriatico dephlogiſticato, inventore *Bertholet.*
Hydrargyrum muriatum fortius præcipitatum.

COMPOSITA.

Solutio ſublimati ſpirituoſa (*Van Swieten.*)
Syn. Solutio mercurii ſublimati corroſivi. *E.*
Mixtura mercurialis. *S.*
Mercurius ſublimatus ſolutus. *G.*
β * Solutio hydrargyri muriati fortioris aquoſa.
Pilulæ e mercurio corroſivo albo. *S.*
Dr. Ward's white drop.
Syrop du Cuiſinier.
γ * Lotio Syphilitica flava, ſ. lotio ex hydrargyro muriato fortiori.
Syn. Aqua phagedænica. *O.*
Liquor mercurialis. *A.*
Lotio mercurialis. *T.*
δ Solutio ſublimati balſamica. *Plenck.*
ε * Liquor ad condylomata.
Syn. Aqua cauſtica pro condylomatibus. *Plenck.*

* *Hydrargyrum*

* *Hydrargyrum muriatum mitius;* i. e. acidum muriaticum hydrargyro ſuperſaturatum.

A. Sublimatione.

Syn. Mercurius dulcis (ſublimatione paratus.) *O.*
Mercurius dulcis ſublimatus. *L.*
Calomel ſeu calomelas. *L.*
Aquila alba.
Panacea mercurialis.
Mercurius dulcis lunaris. *Schroeder.*

B. Præcipitatione.

Ex acido nitroſo mediante ſale communi, inventore *Scheele.*

* Hydrargyrum muriatum mitius præcipitatum.
Mercurius præcipitatus dulcis.

Calx hydrargyri muriata præcipitata.

a Ex acido muriatico mediante alkali vegetabili.
Mercurius præcipitatus albus. *L.*

b Ex acido muriatico mediante alkali minerali.
Mercurius præcipitatus albus. *A.*

c Ex acido muriatico mediante alkali volatili.
Mercurius præcipitatus albus. *E.*

d Ex acido muriatico mediante cupro.
Mercurius præcipitatus viridis. *E.*

COMPOSITA.

Bolus mercurialis. *E,*
Bolus jalappæ cum mercurio. *Ib.*
Bolus rhei cum mercurio. *Ib.*
Pilulæ calomelanos. *G.*
Pilulæ Plummeri. *E.*
Pilulæ alterantes Plummeri. *O.*
Pilula depurans. *T.*
Pulvis Plummeri. *O.*
Pilulæ mercuriales purgantes. *A.*
Pilulæ catarrhales purgantes. *D.*
Pilulæ laxantes cum mercurio. *Ib.*
Pulvis e ſcammonio cum mercurio. *T.*

* Lotio ſyphilitica nigra, lotio ex hydrargyro muriato mitiori.
Syn. Lotio mercurialis. *G.*

Unguentum

Unguentum e mercurio præcipitato. *L.*
Linimentum mercuriale. *E. Paup.*

III. *Cum acido ſacchari.*
a Hydrargyrum ſaccharatum. *Bergman.*
* b Saccharum hydrargyratum, ſeu
Hydrargyrum ſaccharo cando ſubactum.

IV. *Cum acido ſuccini.*
Hydrargyrum ſuccinatum. *Bergman.*

V. *Cum acido arſenici.*
Hydrargyrum arſenicatum. *Bergman.*

VI. *Cum acido oxalis acetoſellæ.*
Hydrargyrum oxalinum. *Bergman.*

VII. *Cum acido phoſphorico.*
Hydrargyrum phoſphoratum. *Bergman.*
Præcipitatione ex acido nitroſo mediante urina recenti.
Roſa mineralis. *O.*

VIII. *Cum acido vitriolico.*
* a Hydrargyrum vitriolatum.
Vitriolum mercurii. *O.*
Oleum mercurii. *O.*
b Hydrargyrum vitriolatum flavum.
Turpethum minerale. *O.*
Mercurius emeticus flavus. *L.*
Mercurius flavus. *E.*
Mercurius præcipitatus luteus. *D.*
Turpethum nigrum. *O.*
c Hydrargyrum præcipitatum ex acido nitroſo mediante hepate ſulphuris aut calcis.
Mercurius præcipitatus niger. *O.*

IX. *Cum acido ſacchari lactis.*

X. *Cum acido tartari.*
a Hydrargyrum tartariſatum. *Bergman.*

* b Tartarus

* b Tartarus hydrargyratus; i. e. hydrargyratum cum tartaro purificato unitum. *Terre feuilletée mercurielle*, inventore *Preſſavin.*

c Præcipitatione ex acido nitroſo mediante acido tartari.

* Hydrargyrum tartariſatum flavum; vulgo, *Pulvis Conſtantinus.*

d Præcipitatione ex acido muriatico et acido tartari junctis mediante alkali vegetabili.

* Hydrargyrum tartariſatum album; vulgo, *Pulvis argentens.*

XI. *Cum acido citri.*

Hydrargyrum citratum. *Bergman.*

XII. *Cum acido nitroſo.*

* Hydrargyrum nitratum.

a Calcinatum mediante igne.

* Hydrargyrum nitratum rubrum.

Mercurius corroſivus ruber. *L. E.*
Mercurius præcipitatus ruber. *O.*
Pulvis principis. *O.*
Mercurius corallinus. *L.*
Mercurius tricolor. *O.*
Panacea mercurii. *O.*
Arcanum corallinum.
Panacea mercurii rubra. *O.*

Composita.

Balſamus mercurialis. *Plenck.*
Unguentum ophthalmicum. *St. Ives.*
Balſamum ophthalmicum rubrum. *D.*
Unguentum præcipitatum. *G.*
Unguentum ad lippitudinem. *T.*
Unguentum mercuriale rubrum. *D.*
Unguentum pomatum rubrum. *D.*

* b Acidum nitri hydrargyratum; i. e. hydrargyrum in acido nitroſo ſolutum.

Solutio mercurii. *E.*

Composita.

Unguentum citrinum. *E. S.*

* c Præcipitatione.

* c Præcipitatione.
Ex acido nitri mediante alkali volatili.
α Hydrargyrum nitratum cinereum.
Pulvis mercurii cinereus. *E.*
Turpethum album. *O.*
β Ex acido nitroſo mediante alkali volatili vinoſo (ſpiritu ſalis ammoniaci vinoſo.)
Turpethum nigrum.
Mercurius præcipitatus niger.
γ Ex acido nitroſo mediante alkali vegetabili.
Mercurius præcipitatus fuſcus, inventore *Würtz.*
δ Ex acido nitroſo mediante cupro.
Mercurius præcipitatus viridis. *B.*

XIII. *Cum acido fluoris mineralis.*
Hydrargyrum fluoratum. *Bergman*

XIV. *Cum acido acéti.*
* Hydrargyrum acetatum. *Bergman.*

Composita.
Trochiſci, *S.* pilulæ *Keyſeri.*

XV. *Cum acido boracis.*
Hydrargyrum boraxatum. *Bergman.*

XVI. *Cum acido cœrulei Berolinenſis.*

XVII. *Cum acido molybdænæ.*

XVIII. *Cum acido tungstenico.*

XIX. *Cum acido aëreo.*
Hydrargyrum aëratum. *Bergman.*

II. COMPOSITA*

Aqua Picea.

℞ Picis liquidæ, libras duas.
Aquæ libras octo.
In vaſe ligneo mixta agita baccillo ligneo: deinde per duodecim horas ſubſidat, pix et aqua decantetur.

Aqua Plumbata (vulgo Aqua Saturnina *Goulardi.*)

℞ Aquæ diſtillatæ, libras duas;
Spiritus vini, unciam unam.
Aceti plumbati, unciam ſemis.

Aqua Calcis.

℞ Calcis recenter uſtæ, libram unam.
Senſim affunde aquæ libras octo.
Ebullitione, quæ inde oritur, peracta, vas agitetur: deinde ſubſidat calx, et aqua per chartam colata in lagenis rite occluſis ſervetur.

Bolus ex Hydrargyro.

℞ Hydrargyri puri, grana decem.
Extracti glycyrrhizæ, ſcrupulum unum.
Terantur ſimul, donec globuli hydrargyri perfecte diſparuerint.
Fiat Bolus.

Bolus ex Hydrargyro calcinato.

℞ Hydrargyri calcinati.
Succi papaveris ſomniferi inſpiſſati, ana granum unum ſemis.

* In formulis ſequentibus nomen genericum et ſpecificum plantarum adhibitarum Linnæanum ubique retinui; ita tamen, ut dum nomen plantæ genericum et ſpecificum ex duobus ſubſtantivis compoſitum eſt, primum ubique indeclinatum, majoris perſpicuitatis cauſa, reliqui.

Extracti glycyrrhizæ, quantum ſatis.
Miſce, fiat bolus.

Bolus ex Hydrargyro compositus.

℞ Hydrargyri muriati mitioris præcipitati granum unum—duo.
Sulphuris antimonii, grana duo—quatuor.
Succi papaveris ſomniferi inſpiſſati, granum unum.
Conſervæ cynoſbati, vel
Extracti glycyrrhizæ, quantum ſatis,
Ut fiat bolus.

Cataplasma Discutiens.

℞ Micæ panis, quantum placet.
Aquæ plumbatæ, quantum ſatis, ut fiat cataplaſma; frigide applicandum.

Catheteres.

Ex argento, melius ex reſina elaſtica variæ magnitudinis.

Cerei.

Ex reſina elaſtica; aut ex chordis muſicis ex inteſtinis ovium confectis, variæ magnitudinis.

Cerei Medicati.

℞ Ceræ flavæ liquefactæ, libram unam.
Sebi phyſeteris macrocephali (vulgo ſpermaceti,) drachmas tres.
Aceti plumbati, drachmas duas—unciam unam.
Commixtis et ab igne remotis, immerge telas tenues, ex quibus fiant lege artis cerei.

Cerei Medicati (inventore *Le Dran.*)

℞ Herbæ conii maculati,
Foliorum nicotiana-tabaci,
Summitatum florentium hyperici perforati,
Radicis iridis Florentinæ, ana manipulum unum.
Infunde in decocti nucum juglandis regiæ, libra una.

Adde,

Adde, herbæ anchuſæ officinalis, libram unam, (N. unde color ruber)
Axungiæ porcinæ,
——— ovillæ curatæ, ana libras tres.
Miſce ſuper ignem; dein adde
Ceræ flavæ, libras duas.

Decoctum Astragali.

℞ Radicis aſtragali exſcapi, unciam ſemis.
Coque in aquæ fontis libra una ſemis ad colaturam libræ unius.
Sumat tepide mane et veſpere.

Decoctum Dulcamaræ.

℞ Stipitum ſolanum-dulcamaræ recentium, drachmam ſemiſ.
Coque in aquæ fontanæ libra una, ad colaturam libræ ſemis.
Sumat quotidie cum anatica portione lactis.

Decoctum Guajaci.

℞ Ligni et corticis guajaci officinalis raſi, libram unam.
Infunde in aquæ fervidæ libris octo
Per viginti quatuor horas; dein lento igne coque per ſex horas; addendo, ſub finem coctionis,
Spiritus vini rectificati uncias quatuor,
Radicis glycyrrhizæ uncias duas.
Cola. Sumat libram ſemi bis de die.
Maſſa a colatura reſidua denuo coquatur cum aquæ libris octo per bihorium, cola.
Utatur hoc decocto ſecondario loco potus ordinarii.

Decoctum Guajaci Compositum.

℞ Ligni et corticis guajaci officinalis, uncias ſex.
Radicis laurus-ſaſſafras, uncias quatuor.
Coque in aquæ fontanæ libris viginti quatuor.
Ad libras duodecim; ſub finem coctionis adde,
Radicis glycyrrhizæ, vel paſſularum, uncias duas.
Cola. Sumat libras duas de die.

DECOCTUM LAPPÆ.

℞ Radicis arctium-lappæ, uncias tres.
Coque in aquæ fontanæ libris tribus,
Ad colaturam librarum duarum.
Sumat de die.

DECOCTUM LOBELIÆ.

℞ Radicis Lobeliæ ſyphiliticæ ſiccatæ, manipulum unum.
Coque in aquæ fontanæ libris duodecim,
Ad colaturam librarum ſex vel novem.
Sumat libram ſemis bis de die in initio, deinde libram ſemis quater de die, donec vim purgantem amplius ferre non poſſit; tunc deſiſtat per tres aut quatuor dies, dein iterum continuet, donec curatus fuerit.

Nota. Eodem modo paratur decoctum radicis ceanothi Americani.

DECOCTUM LUSITANICUM.

℞ Radicis ſmilax-ſarſaparillæ,
Ligni laurus-ſaſſafras,
—— pterocarpi ſantolini (vulgo ſantoli rubri,)
—— guajaci officinalis, ana uncias tres.
Radicis daphne-mezerei, unciam unam.
Seminum coriandri ſativi, drachmas ſex—unciam unam.
Coque in aquæ fontanæ libris viginti, ad libras decem.
Sumat libram unam—tres de die.

Aliter:

℞ Radicis ſmilax-ſarſaparillæ,
Ligni pterocarpi ſantolini,
—— ſantoli albi, ana uncias tres.
Radicis glycyrrhizæ,
—— daphne-mezerei, ana unciam ſemis,
Ligni geniſtæ Canarienſis (vulgo lignum Rhodium,)
—— guajaci officinalis,
—— laurus-ſaſſafras, ana unciam unam.
Antimonii ſulphurati, uncias duas.
Miſce, et infunde in aquæ fervidæ libris decem per viginti quatuor horas, dein coque ad colaturam librarum quinque.

Sumat

Sumat libram unam ſemis—libras quinque—quotidie.

Decoctum Mezerei.

℞ Corticis radicis, vel Radicis, daphne-mezerei, unciam ſemis —unam.

Coque in aquæ fontanæ libris ſex, ad libras quatuor.

Sub finem coctionis adde,

Radicis glycyrrhizæ, unciam unam. Cola.

Sumat quotidie libram unam—libras quatuor, prout ventriculus ferat.

Nota. Quidam corticem radicis radice præferunt.

Ab aliis daphne-laureola daphne-mezereo præfertur.

Decoctum Prunus-Padi.

℞ Corticis prunus-padi, uncias ſex—octo.

Coque in aquæ marinæ, vel, in ejus defectu,

Aquæ fontanæ libris ſex, ad colaturam librarum trium—quatuor.

Sumat libram ſemis quater de die.

Decoctum Saponariæ.

℞ Herbæ ſaponariæ officinalis recentis contuſæ, libram unam.

Aquæ fontanæ, libras ſedecim,

Coque ad colaturam librarum octo.

Bibat æger libras duas—quatuor—de die.

Decoctum Sarsaparillæ.

℞ Radicis ſmilax-ſarſaparillæ, uncias tres.

Infunde in aquæ fervidæ libris tribus, per duodecim horas.

Dein coque ad colaturam librarum duarum.

Sumat quotidie, ſi placet, cum lacte.

Decoctum Sarsaparillæ cum Mezereo.

℞ Radicis ſmilax-ſarſaparillæ, uncias tres.

Corticis radicis daphne-mezerei, drachmas duas.

Coque in aquæ fontanæ libris tribus ad libras duas.

Sub finem coctionis, adde,

Radicis glycyrrhizæ, unciam unam.

Sumat quater de die, libram ſemis.

Decoctum

Decoctum Syphiliticum *Yvonis Gaukes.*

℞ Ligni guajaci officinalis rasi, uncias tres.
—— juniperi communis, uncias duas.
Radicis smilax-chinæ, unciam unam.
Hydrargyri purificati, in sacculo linteo humido ligati,
Antimonii sulphurati, in sacculo separatim ligati, ana unciam unam.
Infunde in aquæ fervidæ libris duodecim, per duodecim horas; dein coque ad libras sex.
Sub finem coctionis, adde,
Radicis glycyrrhizæ, uncias duas. Cola.
Sumat uncias triginta—quadraginta, calide, quotidie per 30 ad 50 dies.

Decoctum Syphiliticum Roborans.

℞ Antimonii sulphurati, pulverisati, et in petia ligati, uncias quatuor.
Lapidis pumicis, pulverisati, et in petia separatim ligati, uncias duas.
Radicis smilax-sarsaparillæ,
——— smilax-chinæ, ana uncias duas.
Nucum juglandis regiæ immaturarum, cum hilis, putaminibus, et cortice viridi siccatarum, Num° quadraginta.
Concisa, mista, coque in aquæ fontanæ libris viginti ad libras decem.
Remanentem liquorem, per linteum colatum, quatuor lagenis inde, quæ bene clausæ, usui serventur.
Sumat dimidium lagenæ mane, et dimidium vespere, tepide.
Magma decocti denuo coquatur cum aqua, ut ante; quo decocto secundario abluantur loca ulceribus, alliisve cutis morbis infecta.

N. B. Hoc decoctum a quibusdam supponitur esse genuicum ita dictum *Decoctum Lusitanicum.*

Decoctum Syphiliticum Rosetti.

℞ Antimonii sulphurati, unciam unam.
Corticis Drymi Winterani recenter pulverisati, drachmam semis.

Mixta,

Mixta, in mortareo marmoreo piſtillo marmoreo optime inſe terantur; dein adde

Cretæ puræ, unciam ſemis.

Triturentur denuo per horam integram in eodem mortario, pulvis ſubtilis ſervetur pro ſequenti decocto:

℞ Radicis arctium-lappæ, uncias tres.

———ſmilax-ſarſaparillæ, uncias duas.

———ſmilax-chinæ (*N. B.* Genuinæ orientalis, vel in ejus defectu occidentalis ſelectiſſime), unciam unam.

———convolvulus-mechoacannæ, unciam ſemis (in lue mediocri).

———————————drachmas ſex (in lue vehemtiocri).

———glycyrrhizæ, drachmas tres—ſex.

Corticum viridum nucum juglandis regiæ, groſſo modo pulveriſatæ, unciam unam (in lue mediocri),

———uncias duas—tres (in lue peſſima, præcipue ſi ſimul Blenorrhœa adſit inveterata).

Seminum coriandri ſativi, drachmas duas.

Inciſa et mixta infundantur in aquæ fontanæ libra una ſemis per duodecim horas, dein coque ad libram unam; colaturæ adde,

Pulveris ſupra dicti, drachmas tres (in lue mediocri,)

———— unciam ſemis (in lue vehementiori,)

———— drachmas ſex (in lue deſperata cum tophis, ulceribus, &c.)

Sumat libram ſemis omni mane, et libram ſemis veſpere, cum pulvere ſequente:

℞ Radicis ſmilax-chinæ orientalis, ſubtiliſſime pulveriſati, drachmam unam.

Ligni laurus-ſaſſafras ſubtiliſſime pulveriſati, ſcrupulos duos (in lue mediocri.)

Ligni laurus-ſaſſafras ſubtiliſſime pulveriſati, drachmas duas—ſex (in caſu graviori, et tunc ſemina coriandri ex decocto præcedenti omittenda ſunt.

Durante uſu hujus decocti, æger ab acidis abſtineat; et ante uſum ejus, per triduum quotidie ſumat purgans ſequens:

℞ Hydrargyri

℞ Hydrargyri muriati mitioris, grana decem.
Resinæ jalappæ pineis subactæ, grana octo.
Trochiscorum alhandal pineis subactorum, grana quatuor.
Terebinthinæ Venetæ, quantum satis, ut fiant pilulæ N° quindecim, pulvere glycyrrhizæ inspergendæ.
Sumat pro dosi. (*N. B.* Hanc dosi nmedicamenti hujus drastici pauci ægri, precipue per triduum continuando, ferre poterunt; hinc dosis ætati et temperamento, &c. adaptanda erit, vel potius aliud purgans simplicius præscribere prestabit.)

ELECTUARIUM.

℞ Pulveris tragacanthæ compositi, drachmas duas.
——— gummi arabici, drachmas sex.
——— rhei, scrupulum unum.
Confervæ florum malvæ, uncias duas.
Syrupi altheæ, quantum satis, ut fiat electuarium.
Sumat cochleare parvulum ter aut quater de die.

ELECTUARIUM LAXANS.

℞ Electuarii lenitivi,
Alkali vegetabilis tartarisati, vulgo tartari solubilis, ana unciam unam.
Misce, fiat electuarium.

EMULSIO AMYGDALINA.

℞ Amygdalarum dulcium decorticatarum, uncias duas,
Terantur in mortario; successive addendo
Aquæ fontanæ libras duas,
——cinnamomi tenuis, uncias duas,
Sacchari albi quantum satis ad gratiam.

INJECTIO AD BLENNORRHAGIAM INCIPIENTEM.

℞ Cupri acetati, drachmam unam.
Liquoris alkali volatilis (vulgo spiritus salis ammoniaci), quantum satis ad solutionem.
Guttæ quatuor hujus liquoris cum uncia una aquæ commixtæ injiciantur quater aut sexies de die.

INJECTIO AD BLENNORRHAGIUM INCIPIENTEM ALIA.

℞ Hydrargyri muriati fortioris, granum ſemis—unum.
Plumbi acetati, grana quindecim—drachmam ſemis.
Aquæ fontanæ, libras duas.
Miſce, injiciat portionem omni ſemihora.

INJECTIO AD BLENNORHAGIAM.

℞ Olei olivarum dulcis, uncias tres.
Injiciat ter quaterve de die portionem.

INJECTIO AD BLENNORRHAGIAM SYPHILITICAM.

℞ Succi papaveris ſomniferi inſpiſſati, vel
Extracti hyoſciami nigri, drachmam unam.
Terendo adde ſucceſſive
Infuſi ſeminum lini,
Olei olivarum dulcis, ana uncias quatuor.
Unguenti hydrargyri, drachmas duas—unciam ſemis.
(Quidam hujus loco præferunt hydrargyri muriati mitioris cum pulveris e ceruſſa compoſiti drachma una triti, grana quinque—octo.)
Miſce, injiciat quater de die, reddito prius lotio.

INJECTIO AD BLENNORRHOEAM PRIMA.

℞ Cupri acetati lævigati, unciam unam ſemis.
Spiritus volatilis aromatici, Ph. Lond. uncias duas.
Melis, drachmas duas.
Miſce; guttæ ſex hujus liquoris cum aquæ tepidæ uncia una miſceantur, ejuſque portio quater aut ſexies de die injiciatur.

INJECTIO AD BLENNORRHOEAM SECUNDA.

℞ Hydrargyri muriati mitioris, unciam ſemis.
Aquæ fontanæ, uncias octo.
Miſce agitando.

Vel,

℞ Hydrargyri muriati fortioris, grana quatuor.

Aquæ

Aquæ fontanæ, uncias ſedecim. Miſce.

Injectio ad Blennorrhoeam tertia.

℞ Plumbi calcinati pulveriſati, unciam unam.
Hydrargyri muriati fortioris, drachmam ſemis.
Aceti concentrati, uncias quinque.
Digere in loco calido per duodecim horas, ſæpius agitata phiala;
Dein effunde liquorem per ſubſidentiam depuratum, qui ſervetur uſui.
Hujus liquoris drachmæ duæ—uncia ſemis, cum aquæ deſtillatæ unciis quatuor miſceantur, ejuſque portio ter aut quater de die injiciatur.

Injectio ad Blennorrhoeam quarta.

℞ Plumbi acetati,
Zinci vitriolati, ana grana octo.
Camphoræ pineis ſubactæ, grana quatuor.
Aquæ fontanæ, libram unam.
Miſce, injiciatur portio ſæpius de die.
Nota. Quandoque aluminis drachma ſemis additur.

Injectio ad Blennorrhoeam quinta.

℞ Hydrargyri muriati mitioris, ſcrupulum unum.
Olei amygdalarum, unciam unam.
Liquaminis myrrhæ, unciam ſemis.
Radicis Tormentillæ erectæ pulveriſatæ, drachmam unam.
Miſce; portio hujus injiciatur ter quaterque de die.

Infusum Cannabis.

℞ Seminum cannabis ſativæ
Infunde in aquæ fervidæ libris quatuor. Per mediam horam,
Cola. Bibat pro potu ordinario cum ſacchari quantum ſatis ad gratiam.

Interim

Infusum Ledi Palustris.

℞ Ledi paluſtris, unciam ſemis.
Aquæ fervidæ, libram unam.
Stent per horam, cola.
Sumat libram ſemis ad libram unam de die.

Infusum Malvæ.

℞ Foliorum malvæ rotundifoliæ, manipulus tres.
Infunde in aquæ fervidæ, libris quatuor.
Cola, pro potu ordinario cum ſaccharo.

Lac Hydrargyratum.

℞ Hydrargyri purificati, drachmam unam.
Gummi Arabici pulveriſati, unciam ſemis.
Mixta terantur in mortario non metallico;
Senſim addendo
Syrupi papaveris albi, quantum ſatis,
Donec hydrargyrum perfecte diſparuerit; dein ſenſim affunde
Lactis vaccini bullientis, uncias octo.

Liquor ad Condylomata.

℞ Spiritus vini rectificati,
Aceti concentrati, ana unciam unam ſemis,
Hydrargyri muriati fortioris, drachmam unam.
Aluminis,
Camphoræ,
Calcis plumbi acetatæ, ana drachmam ſemis.
Miſce. Verrucæ aut condylomata penicillo hoc liquore madido ſemel vel bis de die tangantur.

Liquor Stypticus, ſeu Solutio Styptica.

℞ Aluminis,
Vitrioli cupri, ana uncias tres.
Aquæ fontanæ, libras duas.
Coquantur ad ſolutionem; liquori filtrato adde
Acidi vitriolici concentrati drachmam unam ſemis.

Lotio Prophylactica.

℞ Hydrargyri muriati fortioris, drachmam unam.
Terendo in mortario vitreo ſenſim affunde
Aquæ calcis recentis libras duas.
Liquor in vaſe clauſo per ſubſidentiam depuratus a ſedimento flave, et limpidus in lagena probe obturata, uſui ſervetur.

Lotio Prophylactica alia.

℞ Acidi nitri hydrargyrati, grana octo—duodecim.
Aquæ deſtillatæ, libram unam.

Vel,

℞ Hydrargyri muriati fortioris, grana decem—duodecim.
Aquæ deſtillatæ, libram unam.

Vel,

℞ Aquæ calcis recenter paratæ, quantum placet.

Vel,

℞ Alcali cauſtici, guttas ſex.
Aquæ diſtillatæ, quantum ſatis.
Ita ut mucum a lingua lenitur tollat.

Lotio Syphilitica Flava.

Eadem eſt ac *Lotio Prophylactica prima.*

Lotio Syphilitica Nigra.

℞ Hydrargyri muriati mitioris, drachmam unam.
Aquæ calcis recentis, uncias quatuor.

Lotio Syphilitica Tonica.

Vide ſupra *Decoctum Magnatis* ex *Decocto Syphilitico Roborante.*

Lotio ad Ulcera Syphilitica.

℞ Spiritus Roſmarini, vel ſpiritus alius cujuſcunque, quantum placet.
Linteum carptum eodem madidum ſæpius ulceri applicetur.

Nota.

Nota. Idem quoque egregie ſervit pro lotione prophylactica.

Vel,

℞ Acidi nitri hydrargyrati, grana quindecim.
Aquæ diſtillatæ, libram unam.

Vel,

℞ Hydrargyri muriati fortioris, grana decem.
Plumbi acetati, drachmam ſemis.
Aquæ fontanæ, libram unam.
Miſce.

Lotio ad Ulcera Syphilitica Composita.

℞ Aquæ calcis recentis, uncias duas.
Tutiæ preparatæ, grana undecim.
Vitrioli cupri, grana tria—quatuor.
Mellis roſacei, drachmam unam.
Miſce.

Mixtura Laxans.

℞ Gummi Arabici, unciam unam.
Olei amygdalarum dulcis, uncias duas.
Decocti hordei, uncias decem.
Mannæ, unciam unam.
Mellis, unciam ſemis.
Miſce, ſumat cochlearea quatuor bis terve de die.

Pilulæ ad Blennorrhoeam.

℞ Cupri vitriolati, granam ſeptem, cum ſemiſſa.
Radicis rhei palmati, drachmam unam.
Extracti cinchonæ officinalis, drachmas duas.
Miſce; fiant pilulæ N° triginta.
Sumat unam—quatuor de die.

Vel,

℞ Terebinthinæ coctæ, drachmas duas.
Radicis rhei palmati pulveriſati, drachmam unam.

Miſce,

Miſce, fiat maſſa dividenda in pilulas triginta ſex.
Sumat pilulas quatuor bis de die.
Nota. Quandoque adduntur limaturæ, vel calcis ferri, grana decem.

Vel,

℞ Gummi Arabici
Radicis rhei palmati, ana unciam unam.
Balſami copaivæ, quantum ſatis, ut fiant pilulæ granorum quatuor.
Sumat quatuor—ſex—mane et veſperi.

PILULÆ EX HYDRARGYRO NITRATO.

℞ Hydrargyri nitrati cinerei, *Ph. Edin.* grana viginti quatuor.
Tere cum extracti glycyrrhizæ quantum ſatis ut fiant pilulæ N° triginti quatuor, conſpergendæ pulvere ſpecierum aromaticarum.

PILULÆ EX HYDRARGYRO CALCINATO.

℞ Hydrargyri calcinati lævigati, grana octo.
Extracti glycyrrhizæ, quantum ſatis ut fiat maſſa dividenda in pilulas duodecim.
Nota. Quandoquè adduntur maſſæ, extracti thebaici *Ph. Lond.* grana octo.
Sumat pilulam unam omni nocte, vel duabus noctibus continuis, intermiſſa tertia.

PILULÆ EX HYDRARGYRO MURIATO MITIORI.

℞ Hydrargyri muriati mitioris, drachmam ſemis.
Succi papaveris ſomniferi inſpiſſati, grana quindecim.
Tartari antimonialis, grana tria.
Conſervæ cynoſbati, quantum ſatis ut fiat maſſa dividenda in pilulas quindecim.
Sumat pilulam unam omni nocte.

PILULÆ EX HYDRARGYRO VITRIOLATO.

℞ Hydrargyri vitriolati, grana quatuor.

Balſami

Balſami Tolutani, grana quinque.
Succi papaveris ſomniferi inſpiſſati, granum ſemis.
Miſce. Fiant pilulæ duæ, quarum una vel ambæ de die ſumantur.

Pilulæ ex Hydrargyro Terebinthinato.

℞ Hydrargyri purificati, unciam unam.
Terebinthinæ optimæ, drachmam unam ſemis.
Terantur ſimul, donec hydrargyrum perfecte diſparuerit; addendo, ſi opus ſit, guttulas aliquot olei terebinthinæ; dein cum pulveris glycyrrhizæ, quantum ſatis, fiant pilulæ octoginta.
Sumat unam vel duas pilulas omni mane et pro re nata, etiam veſpere.

Pilulæ ex Hydrargyro Gummoso.

℞ Hydrargyri purificati,
Pulveris gummi Arabici, ana drachmas tres.
Conſervæ cynoſbati, quantum ſatis.
Terantur in mortario vitreo vel marmoreo, donec globuli hydrargyri perfecte diſparuerint; continuetur tunc trituratio adhuc per horam; dein adde
Micæ panis albi, unciam ſemis.
Subigantur bene in maſſam, ex qua formentur pilulæ granorum trium, pulvere magneſiæ vel glycyrrhizæ conſpergendæ.
Sumat pilulas ſex omni mane et veſpere.

Vel,

℞ Hydrargyri purificati, ſcrupulum unum.
Amyli, drachmam unam.
Formentur cum mucilaginis gummi Arabici quantum ſufficit in pilulas viginti.
Sumat duas quotidie.

Pilulæ Laxantes.

℞ Aloes ſoccotrinæ, grana duodecim.
Gummi cambogiæ, grana ſex.

Olei

Olei ſtellati aniſi, guttas tres.
Probe ſimul tritis adde
Syrupi ſimplicis quantum ſatis ut fiat maſſa dividenda in pilulas ſex.
Sumat pilulam unam vel duas veſperi.

PILULÆ PURGANTES.

℞ Maſſæ pilularum Rufi, drachmam ſemis.
Reſinæ jalappæ,
Hydrargyri muriati mitioris, ana grana quatuor.
Miſce, fiant pilulæ N° tres.
Sumat pro doſi.

PULVIS AD BLENNORRHAGIAM.

℞ Nitri,
Sacchari, ana grana quindecim.
Camphoræ pineis ſubactæ. grana duo.
Miſce, fiat pulvis omni hora vel bihorio ſumendus
* Multum a quibuſdam laudatur.

Vel,

℞ Gummi Arabici, ſcrupulum unum.
Nitri, grana decem.
Camphoræ pineis ſubactæ, granum unum—tria.
Miſce. Sumat pulverem hunc quater de die.

PULVIS SYPHILITICUS.

℞ Hydrargyri muriati mitioris præcipitati, grana duo.
Sacchari, grana quindecim.
Miſce. Sumat omni nocte.

SOLUTIO GUMMOSA.

℞ Gummi Mimoſæ niloticæ pulveriſati (gummi Arabici), drachmas duas.
Solve in aquæ fervidæ, libris duabus.

SOLUTIO HYDRARGYRI MURIATI FORTIORIS.

℞ Hydragyri muriati fortioris, grana ſexaginta quatuor.

Aquæ

Aquæ deſtillatæ, uncias quatuor.
Solutis adde
Salis ammoniaci, drachmam unam. Miſce.
Sumat guttas ſedecim in libra decocti ſarſaparillæ, vel malti, hordei, &c. omni die.
Pro re nata tinctura Thebaica additur, et doſis guttarum ad quadraginta octo gradatim augetur.
Nota. Sedecim guttæ ſolutionis hujus continent granum ſemis hydrargyri.

Syrupus Hydrargyri.

℞ Hydrargyri purificati, ſcrupulum unum.
Gummi Arabici, ſcrupulos tres.
Conſervæ cynoſbati, quantum ſatis.
Tere in mortario non metallico, donec hydrargyrum penitus diſparuerit; dein continuando triturationem adhuc per horam, adde
Syrupi ſimplicis, unciam unam ſemis.
Sumat mane et veſpere quantum capit cochleare parvulum ligneum vel eburneum.

Tinctura Ferri.

℞ Ferri vitriolati,
Tartari purificati, ana uncias quatuor.
Aquæ fontanæ, libras ſex.
Coquantur in vaſe ferreo ſub continua agitatione, ad ſiccitatem fere, tunc in
Aquæ cinnamoni ſimplicis, unciis quatuor ſoluta, atque cum liquoris anodyni mineralis Hoffmanni diluta, digerantur, et filtrentur.

Vel melius,

℞ Limaturæ ferri puræ lævigatæ, unciam unam.
Acidi muriatici concentrati, quantum ſatis ut ferrum perfecte ſolvantur.
Solutio per aliquot tempus quieti expoſita, filtreter; dein ex retorta vitrea in balneo arenæ deſtilletur ad ſiccitatem.
Maſſa in retorta reſidua in loco humido ſeponatur, donec

 deliqueſcat.

deliqueſcat. Maſſa deliqueſcens phialæ epiſtomio vitreo inſtructæ immittatur, eique ætheris vitriolici concentrati unciæ duæ addantur; tunc phiala exacte clauſa probe agitetur, unde maxima pars ferri ætheri jungitur. Quamprimum æther ferro impræ̃gnatus poſt brevem quietem ſupernatat, a liquore inferiori effunditur, et cum dupla quantitate ſpiritus vini rectificatiſſimi miſcetur, atque in vaſe vitreo exactiſſime obturato uſui ſervatur.

Nota. Hæc tinctura eſt preparatio correcta *Tincturæ Nervinæ*, jure celebris, quæ diu ſecreta habita, nuper Imperatricis Roſſiæ munificentia publici juris facta eſt.

Trochisci Keyseri.

℞ Hydrargyri purificati, quantum placet.

Diuturna trituratione vertatur in pulverem nigrum, qui ex retorta ſublimatus, longa denuo trituratione in aceto concentrato diſſolvatur; addendo ſub finem

Mannæ, quantum ſatis, ut fiant trochiſci.

Nota. Tædioſo huic proceſſui ſequens præferri meretur.

Trochisci ex Hydrargyro Acetato.

℞ Hydrargyri nitrati rubri, quantum placet.

Cum aceto deſtillato coquatur ad ſiccitatem. Maſſa reſidua cum manna, lege artis, in trochiſcos formetur.

Trochisci ex Saccharo Hydrargyrato.

℞ Hydrargyri purificati, unciam unam.
Sacchari candi, uncias duas.

Triturentur, donec hydrargyrum perfecte diſparuerit; tunc ex maſſa, lege artis, fiant trochiſci ponderis drachmæ dimidiæ.

Vinum Roborans ad Blennorrhoeam.

℞ Corticis cinchonæ officinalis, uncias duas.
Gallarum, drachmas duas.
Caryophillorum aromaticorum, drachmam ſemis.

Pulveriſata

Pulverisata infunde in

Vini rubri libra una per biduum, sæpius agitando; liquorem per subsidentiam depuratum effunde, et massam residuam cum aquæ fontanæ, libra infunde per horam.—Cola, et misce cum priori.

Sumat cochlearia quatuor majora ter quaterve de die.

VINUM TONICUM.

℞ Corticis cinchonæ officinalis subtilissime pulverisati, unciam unam semis.

Infunde in vini generosi unciis sedecim per biduum, sæpius agitando,

Dein effunde liquorem per subsidentiam depuratum, eique adde

Olei cajeput (ex foliis melaleuca-leucadendri destillatione obtenti,) cum sacchari albi, uncia una triti, guttas quadraginta octo.

Liquoris anodyni mineralis, uncias duas.

Sumat uncias duas—tres, bis terve de die.

UNGUENTUM HYDRARGYRI.

℞ Adipis suilli recentis curati, uncias duas.

Liquefiat leni calore, et dum ab igne remotus spissescere incipit, adde gradatim, triturando,

Hydrargyri purificati, uncias duas,

Continuando triturationem, postquam hydrargyrum omne disparuerit, adhuc per bihorium.

Servetur in loco frigido.

Nota. Aliquando præstat parare hoc unguentum ex anatica portione butyri cacao, vel etiam mucilaginis gummi Arabici.

UNGUENTUM EX PLUMBO ACETATO.

℞ Olei olivarum dulcis, uncias octo.

Ceræ albæ, unciam unam semis.

Plumbi acetati, lævigati, drachmas duas.

Plumbum acetatum cum portione olei trituretur; dein cera

cum oleo reliquo calefacta, addatur agitando maſſam, donec frigeſcat.

UNGUENTUM SYPHILITICUM ALBUM.

℞ Hydrargyri ex acido muriatico mediante alkali vegetabili præcipitati, drachmas duas.
Axungiæ porcinæ recentis curatæ, unciam unam ſemis.
Miſce terendo.

UNGUENTUM SYPHILITICUM CITRINUM.

℞ Hydrargyri purificati,
Acidi nitroſi concentrati, ana unciam unam.
Digere in balneo arenæ, donec ſolvatur hydrargyrum; dein adde triturando
Olei olivarum dulcis, uncias quatuor.
Axungiæ porcinæ, uncias octo.
Nota. Quandoque præſtat dupla quantitas axungiæ.

UNGUENTUM SYPHILITICUM RUBRUM.

℞ Hydrargyri nitrati rubri, drachmas duas.
Unguenti baſilici, unciam unam ſemis.
Miſce triturando.

UNGUENTUM SYPHILITICUM RESOLVENS.

℞ Unguenti Hydrargyri,
——— de arthanita, ana unciam unam.
Radicis atropa-mandragoræ pulveriſatæ, unciam unam ſemis.
Mellis quantum ſatis.

UNGUENTUM SYPHILITICUM VIRIDE.

℞ Cupri acetati lævigati, grana duodecim.
Olei olivarum dulcis, uncias tres.
Miſce terendo.
Portio linteo carpto excepta ulceri ſyphilitico applicetur.

A SHORT

A

SHORT REVIEW

OF A LATE

Treatiſe on the Venereal Diſeaſe,

By JOHN HUNTER.

MR Foot, in his *Obſervations* upon the new opinions contained in this Treatiſe, has taken them up already in ſo maſterly a manner, that there remains little to be added. However, on peruſing the great book, I found ſeveral paſſages which deſerved ſome further notice, in order to render young practitioners more cautious not to be deceived by ſpecious and fallacious reaſoning, ſupported by profeſſorial authority, as well as to ſhow my readers more particularly the reaſons how it happens that my ideas on the nature as well as on the cure of venereal complaints (nearly of every one of them) are either different or directly oppoſite to thoſe advanced by Mr. John Hunter.

Mr. Hunter ſets out with ſaying, " That he was " induced by two motives to publiſh his Treatiſe " Firſt, In hopes that ſeveral new obſervations con-

" tained

" tained in it will be deemed worthy of the public at-
" tention; and in the next place, becauſe he was
" deſirous to have an opportunity of aſſerting his
" right to ſome *opinions* that have made their way
" into the world under other names." Had he inverted the theſis, and ſaid that he ſat down with the pen in his hand, to prove how many whimſical ideas and monſtrous excreſcences of his brain an ingenious man may think worthy of the public attention; and, ſecondly, How much a vain man, who is ignorant of the different writings and diſcoveries made by his cotemporaries of the ſame profeſſion, can attribute to himſelf what he ſhould have attributed to others —he would have come, I believe, pretty near the truth. This, however, muſt always be the caſe, when a man ſits down and writes with the fulleſt perſuaſion, that, feeling himſelf poſſeſſed of ſome genius, all the reſt of his profeſſion have none; or becauſe ſome new ideas on a particular ſubject occur to his mind, nobody elſe can have diſcovered, or is able to diſcover, any thing new upon the ſame ſubject. He muſt of conſequence be greatly miſtaken, eſpecially if ſome of theſe new ideas or diſcoveries now claimed by him, have been made a long while before by others, and he having been informed of them in private converſation, had either forgot this point, or wiſhes to make the world believe that theſe diſcoveries were made by himſelf.—The author ſeems here to inſinuate, that ſome diſcoveries of his on this ſubject have been publiſhed by others; but as he does not ſpecify this kind of theft or robbery, we muſt defer this diſcuſſion till he has made good his charge,

and

and points out the particular facts, experiments, and obſervations which he claims as his property.

Page 2. he ſays "The ſuppoſition of the lues being "combined with other diſeaſes, appears to me to be "founded in ignorance; becauſe I have never ſeen "any ſuch caſes, and becauſe they do not ſeem to "me to be conſiſtent with the principles of diſeaſed "action in the animal œconomy." As Mr. H. is ſo liberal in charging others with ignorance, he will excuſe me, when I ſay, that this manner of reaſoning appears to me to be founded on ignorance and pride, and conſequently perfectly inadmiſſible; eſpecially as there is hardly a practitioner who has not ſeen repeatedly the contrary in his practice. Patients of the lower claſs of people are often affected with the itch, and at the ſame time with cutaneous venereal eruptions. In ſailors too, it is not ſo rare to find blotches produced by the ſea-ſcurvy united with the venereal ones, and who has not ſeen ſcrophulous perſons affected with all the ſymptoms of the lues venerea?

P. 11. it is ſaid, "That a woman without any ſymp-"tom may give the lues;" and, p. 12. "That, to "communicate the diſeaſe, it is neceſſary that the "venereal action ſhould firſt take place, and that "the matter ſhould be formed in conſequence of that "action; and that therefore a perſon having the ve-"nereal irritation in any form not attended with a diſ-"charge, cannot communicate the diſeaſe to another." Mr. H. in conſequence of this, "allows married "men to cohabit with their wives as long

"there

" there appear no ſymptoms; nay, he even would " allow a man, who has a clap, to have connection " with a ſound woman, if he took great care to clear " all the parts of any matter, without any fear of in- " fecting the woman." The firſt of theſe propoſitions ſeems to be an open contradiction: And with regard to the latter, I fear Mr. H. would not truſt to make the experiment himſelf upon his own wife; I certainly would not try it upon mine.

P. 17. From the frequent appearance of ſhankers and gonorrœa in the ſame perſon at the ſame time, I ſuſpect indeed with Mr. H. " that the urethra ne- " ver *ſympathiſes* with the ſhanker; and that conſe- " quently the *diſeaſed action* of the one does not de- " ſtroy the *diſeaſed action* of the other."

P. 19. line 4. he maintains, " That the matter of " every ſore or ſecreting ſurface will not become " venereal by applying venereal matter to it."— From my obſervations I am convinced of the contrary.

P. 20, 21. Nothing but looſe theoretical reaſoning unſupported by any well-authenticated facts.

P. 29, 30, 31. He attributes the diſcovery "that " pus may be formed by inflammation without ulcera- " tion, to his brother *Dr. W. Hunter* and to *Mr.* " *Sharp*, made 1749:" Probably, becauſe he was ignorant of this diſcovery having been made ſeveral years before by *Morgagni* in Italy, and *De Haen* at Vienna.

Vienna. This alſo eaſily accounts for other writers not mentioning *Dr. Hunter* or *Mr. Sharp*.

P. 31,32. I find the aſſertion, "That after the conta-
" mination the gonorrhœa is earlier in its appearance
" than ſhankers," falſe, or at leaſt too general. I have ſeen many times ſhankers appear within 12 or 24 hours after coition, and hardly ever a gonorrhœa before the ſecond or third day. Gonorrhœas ariſing ſo late as four or ſix weeks after a ſuppoſed infection, with an unuſual ſenſation before its eruption, made me of late rather believe, that theſe gonorrhœas ariſe from a formerly tainted habit, having often ſeen ſhankers ariſe with the ſame ſymptoms from the ſame cauſe.

P. 55. "It has been aſſerted, but without proof,
" that in caſes of ſwelled teſticles in conſequence of
" a gonorrhœa, it is not the teſticle itſelf that ſwells,
" but the epididymis." The writer who firſt made this diſcovery, ſaid *in expreſs terms*, that this was the caſe *in the beginning of the diſorder*; which every unprejudiced perſon may convince himſelf of by daily experience.

P. 69. He ſays, "I am inclined to believe, medi-
" cine is very ſeldom of any ſervice in this form of
" the diſeaſe (gonorrhœa)." A favourite aſſertion of ſome of thoſe gentlemen who wiſh to make the world believe they are more enlightened and more candid than the reſt of their brethren. However, in p. 75 I find "local applications may be either internal to the
" urethra, external to the penis, or both; all of which
" will in many caſes be neceſſary."——Internal

" medicines ſeem the moſt likely to cure this ſpecies " of diſeaſe." And a little further on, " local appli- " cations are either in a ſolid or fluid form: the fluid " is a temporary application, and of ſhort duration: " the ſolid applications would appear to have an ad- " vantage over the fluid applications by their con- " tinuance; but they in general irritate immediately, " from their ſolidity alone &c." This, and the whole ſtyle of reaſoning till the end of this ſection, if it be reaſoning, is a ſtrange kind of reaſoning indeed! But let us ſee the inference of this reaſoning, " That ſolid " applications are preferable to fluid ones; but that " this latter irritate in general immediately, and the " leſs uſe we make of them the better; though he " had never ſeen any bad effect from them in any " caſe." And a moment after he ſays, " fluid appli- " cations, it appears from practice, will often have " almoſt an immediate effect upon the ſymptoms; " and they muſt be uſed often in caſes where they " are found to be of ſervice." The whole, I think, needs no comment!

P. 77. We find the ſame ſtrange manner of rea- ſoning, " about the ſtopping the diſcharge and inflam- mation," continued. The following will ſerve as an example: " when the diſcharge is an effect of pre- " ſent inflammation, it may be ſtopt by injections, " though the inflammation ſtill continues in ſome de- " gree, and may afterwards be removed without the " diſcharge ever re-appearing: but I believe, that by " this practice little is gained; for the effect of the " inflammation is not the diſeaſe which we wiſh to " remove. However, we find, that the ſame me-

" thod

" thod which ſtops the diſcharge, alſo removes the " inflammation, although not always, and only I be- " lieve when the inflammation is ſlight." And,

P. 79. " Sedative injection will always be of ſer- " vice; not by leſſening the diſeaſe, but by leſſening " the diſeaſed action, and are very uſeful in relie- " ving the painful feelings." I think, if they do this, Mr H. might have allowed that they leſſen the diſeaſe.

P. 80. He ſays " the balſams, turpentines, diſſol- " ved in water."—This, I ſuppoſe, is one of Mr H's. diſcoveries in chemiſtry, which certainly nobody will diſpute him; for this is the firſt inſtance I know of, of thoſe ſubſtances being ſoluble in water.—In the ſame page, I find " emollients may be uſed like- " wiſe externally (in gonorrhœa), in form of fo- " mentation;" and p. 81, " External applications, " ſuch as poultices and fomentations, can be of little ſervice.

P. 82. He recommends the mercurial ointment; but obſerves, " that the practice rather ariſes from a " kind of *practical analogy*, than real knowledge of " its uſe in ſuch caſes." And p. 83. " When the in- " flammation runs along the ducts of the glands, in " particular the mercurial ointment is to be freely " applied to the parts."

P. 91. He recommends bleeding and purging, fo- mentations and poultices, for ſwelled teſticles, with- out mentioning upon what ground or authority.—I wiſh the patient joy of a ſpeedy recovery under the uſe of theſe medicines.

P. 92. He obſerves, " Some have gone further, by " recommending the introduction of venereal matter " into the urethra (for removing a ſwelling of the " teſticle); but this appears to be only conceit, and " is founded upon a ſuppoſition that ſuch diſeaſes a- " riſe only from venereal irritations, &c."—This method has never been recommended but in ſwellings of this kind from a venereal cauſe; and by no means upon *conceit*, as now and then, I am afraid, is the caſe with our author, but from authentic obſervations, founded on numerous experiments, made and publiſhed about twenty years ago, in one of the greateſt Military hoſpitals of Europe, which were afterwards confirmed by Mr Plenck and Dr Lang. The author ſeems to give it likewiſe as a new obſervation of his own, that ſwellings of the teſticles are produced by other cauſes. This, however, has been known and mentioned by nearly every writer on the diſeaſes of the genitals, ancient and modern, from Celſus down to the preſent age.

P. 111, *Note*, He ſays, " Many other kinds of ob- " ſtructions (in the urethra) are deſcribed by authors, " none of which I have ever ſeen; and as probably " I have opened more urethras after death, where " there was an obſtruction of the paſſage, than all " the authors who have written on this ſubject, I " am inclined to believe, that they wrote from ima- " gination only."—Allowing the principal aſſertion to be true, it would appear that Mr J. H. has read all the authors that have written on this ſubject which I will not now diſpute: but we ſhould rather expect that a man of ſo great learning and erudition would

would be a little more modeſt in drawing ſuch general concluſions.

P. 237. In ſpeaking of the treatment of phymoſis, he ſays, "I believe the mercury ſhould be given *ſparingly*." And the moment after, "I therefore do "ſuppoſe, that ſuch medicines as may be thought "neceſſary for the conſtitution, ſhould be given "*liberally* as well as the *ſpecific*."—If under the word *ſpecific*, mercury is to be underſtood, and I cannot ſuppoſe any thing elſe, the young practitioner, who wiſhes to follow Mr. H.'s advice, will be a little puzzled, I am afraid, about the doſe of the remedy.

P. 248, 249. He gives us another ſpecimen of his chemical knowledge. "In the following caſe" he ſays "the *lixivium ſaponarium* produced a ſpeedy "cure;" and then proceeds, "after having tried ſe-"veral methods in vain, I ordered 40 drops of the "*lixivium tartari* to be taken every evening in a ba-"ſon of broth." Mr. H. ſurely does not mean, that theſe two ſubſtances are the ſame: for if he was of this opinion, I humbly ſuggeſt, that the former is *cauſtic* alkali, and would undoubtedly kill the patient if given in the doſe he preſcribes; and the latter, which is *mild* alkali, may be given without any danger.

P. 255. In the hiſtory of abſorbents, no mention is made of Dr. *Meckel*, who was the firſt writer on this ſubject and who firſt taught publicly the doctrine about the lymphatic ſyſtem and abſorbents at Berlin, a good

a good many years before Dr. Will. Hunter or any other Profeſſor in this country.

P. 293. "We never find a bubo from the abſorption of matter; when there are venereal ſores "on the arms, &c. there are no ſwellings of the "glands of the arm-pit"—If Mr. H. by the word *we* underſtands himſelf, I cannot controvert that he has never ſeen any ſuch thing; but I have ſeen a bubo under the arm-pit from a venereal tetter on the elbow, and a bubo in the loins from a venereal ulcer in the toe; and other practitioners have obſerved ſimilar ſwellings from the ſame cauſe.—the reaſoning throughout the whole of this page is vague, and contradicted by facts.

P. 294, 296. We find the ſame reaſoning continued; and p. 297, he tells us modeſtly, that he has more knowledge and ſagacity than the reſt of his brethren; and pronounces ulcers not venereal, which the reſt of the London ſurgeons declared to be venereal. And when we come to enquire, why he thought them to be not venereal, we find it is, becauſe it appeared to him ſo.

P. 300, 301. nothing but vague and falſe concluſions from vague and falſe premiſes.

P. 302. He ſays, "that a gonorrhœa or ſhanker is "as eaſily cured when the conſtitution is poxed either "by them or previous to their appearance, as when "the perſon is in perfect health; but the conſtitution "cannot be cured without the ſhanker being cu-

"red."

" red."—Both theſe propoſitions are groundleſs and contradicted by every day's experience.

P. 307. " The parts affected in the early ſtage of " the diſeaſe are the ſkin, tonſils, noſe, &c.; when " in its latter ſtate, the perioſteum, faſciæ, and bones, " come into action."—We find in practice, that nature does not always follow ſo exactly the limits preſcribed to her by Mr. Hunter. I have ſeen a patient, whoſe ulna was ſwelled to an enormous ſize, from a ſhanker on the glans penis the third week after its appearance, without any other venereal ſymptom in the body.

P. 364. " From the above experiments it appears " to be immaterial what preparation of mercury is " uſed in the cure of this diſeaſe, provided it is of " eaſy ſolution in our juices, the preparation eaſieſt " of ſolution being always the beſt."—This concluſion, drawn from a few experiments made upon himſelf, is very defective and inadmiſſible in practice: for we daily ſee, that the preparation of mercury, which agrees very well with one patient, diſagrees with the other; and that it is conſequently *very material* what preparation of mercury we uſe.

P. 368. The poultice made of gum guaiac and decoction of ſarſaparilla with oat-meal, appears to be a very unfair trial, deſerves no compariſon, and conſequently no concluſion can be drawn from it.

P. 374. The nature of the caſe related here, not being aſcertained, proves nothing.

P. 307.

P. 307. *Note.* He ſays, that becauſe the ulcer of the tongue gave way to mercury, he ſuppoſed it to be venereal; whereas before, he flatly denied this inference to be juſt.

P. 308, 309. Is a continuation of vague hypothetical reaſoning.

P. 310. He obſerves, "that when the lues venerea has been cured ſo far as only to remove the "firſt actions, but not to eradicate the diſpoſition in "the deeper ſeated parts; under ſuch circumſtances "of the diſeaſe, it never attacks again the external, "or the parts that were firſt affected, but only the "deeper-ſeated parts, which are ſecond in order of "time."—This propoſition would make us believe, that Mr. H. had ſeen very few patients, or that he has concealed a fact which occurs almoſt daily in practice, viz. that ſhankers, after diſappearing under the uſe of mercury, when this is left off, appear again repeatedly on the prepuce or glans. The caſe mentioned in the ſame page ſhows clearly, that the venereal poiſon may lie concealed in the conſtitution for many months, contrary to his aſſertion.

P. 312. *Note.* This is to exculpate his firſt wrong judgment of the caſe, and is as lame as the reaſoning upon the caſe itſelf.

P. 313. Contrary to Mr. H.'s opinion, we really often ſee the parts, which he calls firſt and ſecond in order, affected at the ſame time; and I wonder he ſhould not have obſerved this himſelf.—Well authenticated

thenticated obſervations prove, though much againſt his theory, that the venereal poiſon may be in the maſs, after its viſible effects are cured.

P. 314. "Mercury, prior to the action, will not "remove the diſpoſition, and of courſe will not hinder the action coming on afterwards. However it is "poſſible, and moſt probable, that the medicine, "while it is preſent, will hinder the action taking "place; ſo that no venereal complaints will take "place while under the courſe of mercury, although "the parts may be contaminated."—This propoſition is abſurd, refuted by every day's obſervation, and contradicted by Mr. H. himſelf; for, if this was true, what reaſon could he have to give mercury internally during a clap, bubo, or ſhankers of the genitals?—"The parts firſt in order are more eaſy cu-"red than thoſe of the ſecond order." This is not generally true; much depends of the time they are affected: if recent, the latter yield often as readily as the former, or even more ſo, if the former are old and inveterate,

P. 318. He ſays, "We never find that a man had "a ſhanker a twelvemonth ago, and that it broke "out after in venereal ſcurfs upon the ſkin or ulcers "in the throat." I have ſeen numberleſs inſtances to the contrary.

P. 331. Mr. H. ſeems as unlucky in his mathematical calculations concerning the ſeat, extent of venereal complaints, or number of days required for the cure, &c. as he is in his chemical obſervations.

P. 333. "This practice muſt be continued ſome "time after all ſymptoms have diſappeared," &c. "If the medicine (mercury) were alſo a cure for the "diſpoſition in the parts ſecond in order, and could "prevent their coming into action, it would be ne- "ceſſary to continue it ſomewhat longer on their "account: but this is not the caſe; for the viſible "effects, ſymptoms, or appearances, in the firſt or- "der of parts, give way to the treatment, while the "parts that have only acquired the diſpoſition, and "are ſtill inactive, afterwards aſſume the action and "continue the diſeaſe. This deceives the ſurgeon, "and leaves the ground-work for a ſecond ſet of lo- "cal effects in the parts ſecond in order. But I have "aſſerted, that what will cure an action will not cure "a diſpoſition: if ſo, we ſhould puſh our medicine "no further than the cure of the viſible effects of "the poiſon, and allow whatever parts may be con- "taminated to come into action afterwards."—We leave this unintelligible jargon without any comment; but we think the quacks greatly indebted to Mr. H. for the laſt precept: they may thus charge their patients with two, three, or four different cures. Mr. H. appears, in this caſe, like an acute lawyer, who makes out of one law-ſuit five, and we have nothing to ſay but to pity the poor client.

P. 335, 336. "The effects of mercury on a con- "ſtitution will always be as the quantity of mercu- "ry; and when the ſame quantity affects one con- "ſtitution more than another, it is in the proportion "of the irritability of that conſtitution to the powers "of mercury, entirely independent of any particu-

"lar

" lar preparation, or any particular mode of giving " it." Mr. H.'s ſkill in chemiſtry, we have before obſerved, is not very extenſive; and we may therefore overlook, when he aſſerts, that crude mercury and corroſive ſublimate deſerve no diſtinction as to quality, or manner of adminiſtration in practice.— However, at the end of the page, he ſays, " that in " ſome caſes it is right to try all the different prepa- " rations of mercury; for it will ſometimes happen, " that one preparation will ſucceed when another " will not." Does he aſcribe this likewiſe to the quantity of mercury?

P. 339. Mr. H. warns us againſt a great impoſition, as he calls it; he means the art of avoiding the bad or diſagreeable effects of mercury; becauſe he ſays, " I believe that we are not poſſeſſed of any " means of avoiding theſe effects; viz. of either dri- " ving the mercury to the mouth," &c. We are much obliged to any man for warning us againſt impoſitions: but I muſt beg leave to warn young practitioners againſt the impoſing language of the Profeſſor; and not go on harſhly in pouring in large quantities of mercury into the conſtitution, without any precaution againſt ſalivation, ſymtomatic fever, violent ſweats, or gripings and purgings. A man like Mr. H. may perhaps perſuade his patients, that thoſe diſagreeable or dangerous effects are not owing to his inattention or want of ſkill; but a young man, who ſets out in practice, will often find the contrary, and thereby loſe his reputation.

P. 346. " I do conceive that the recent vene- " real ſores are upon the whole more difficult to cure

" than the conſtitutional ones; at leaſt, they com-
" monly require longer time, although not always."
—I do believe that this is really the caſe when treat-
ed in the manner Mr. H. preſcribes: but I do alſo
humbly conceive, that Mr. H.'s method of treating
recent ſhankers is a bad one; and that on the con-
trary, recent ſhankers, when properly treated, are
much more eaſily cured than conſtitutional ones; and
I think, he might have aſcribed here to his manner
of treatment, what he has aſcribed to the nature of
the complaint.

P. 347. I muſt diſſent here, as well as in moſt o-
ther caſes, from Mr. Hunter; for I have generally
obſerved, that mercury given to perſons who had
made uſe of it formerly, were conſtantly more eaſily
affected by it in the mouth and conſtitution here-
after.

P. 348. He ſpeaks of a tainted conſtitution, which
he denied before, when ſpeaking of the lues in ge-
neral

P. 349. " Let me aſk any one what effect eating
" a hearty dinner, and drinking a bottle of wine,
" can have over the action of mercury upon a vene-
" real ſore? Or what effect can walking in froſt and
" ſnow have upon the operation of mercury, either
" to make it affect any part ſenſibly, as falling upon
" the glands of the mouth, or prevent its effect upon
" the venereal irritation? In ſhort, I do not ſee why
" mercury ſhould not cure the venereal diſeaſe un-
" der any mode whatever of regimen or diet."—I

am

am afraid, that if Mr. H. does not ſee it, his patients will feel it; and young practitioners, following the advice of the Profeſſor, may expoſe their patients either to violent inflammatory fevers, or to the moſt obſtinate excruciating pains, if not to an incurable palſey for life.

P. 350, 351. If the rules laid down in theſe pages about the different preparations of mercury be true, and the care recommended for rendering them more ſafe and effectual, founded in practice, it clearly ſhows, that the effects of mercury are not only in proportion to its quantity, as Mr. H. aſſerted above; but that ſo much depends on its quality, as he ſays here. This, however, is one of the numerous inſtances of Mr. H.'s practice contradicting his theoretical aſſertions.

P. 352. I find the following ſtrange propoſition: "If a more ſimple preparation was to be found out "than crude mercury, it ſhould be made uſe of."—What Mr. H. properly means by this I do not well underſtand; for I cannot believe him ſo ignorant, as not to know that crude mercury is not a preparation but a *ſimple* product of nature. But why wiſhing to employ a more ſimple mercurial preparation than the ſimpleſt of all, viz. crude mercury; eſpecially if all the different preparations, as mentioned above (p. 135, 136.), are the ſame; and if their effects are only in proportion to their quantity, and entirely independent of their quality?

P. 359. He ſays, "That the increaſed ſecretions

"in

" in ſalivary glands, cutaneous veſſels, interciſes, a-
" riſe from the conſtitution being loaded with mercu-
" ry.—If this be owing only to the quantity of mer-
cury, without any reſpect to its quality, we would aſk Mr. H. How it comes that two or three grains of calomel produce now and then ſuch violent effects upon the inteſtinal canal? or why three or four doſes of ſublimate, of half a grain each, not unfrequently produce ſo violent ſweatings or ſalivation? This, we apprehend, he will not maintain from the conſtitution being loaded with mercury.

P. 360, *Note.* " Sulphur united with any of the
" metals probably deſtroys their ſolubility in the
" juices, or at leaſt in their effects in the circulation.
" None of the cinnabars are either as ſulphur or mer-
" cury. Crude antimony, which is regulus of anti-
" mony and ſulphur, has no effect. Arſenic, when
" joined with ſulphur, has no effect; nor has iron."
The firſt propoſition of this note is a mere conjecture, unſupported by any argument or fact; the ſecond is true; and the third, viz. that crude antimony, yellow arſenic or orpiment, and iron united with ſulphur, have no effect, is totally falſe without foundation.

I NOW come to what I reſerved for the laſt point of diſcuſſion, *the Chapter on Impotence*; in which I ſhall only take notice of the two following propoſitions. Here are Mr. H.'s own words: " I think I may af-
" firm, that the act of manuſtupration in itſelf does
" leſs harm to the conſtitution in general than the
" natural act of coition: That the natural act of coi-

" tion

" tion with common women, or ſuch as we are in-
" different about, does leſs harm to the conſtitution
" than where it is not ſo ſelfiſh, and where the affec-
" tions for the woman are alſo concerned."——Was this reaſoning juſt, it would apply to prove, that our hands were made for ***; and that it would be better and more healthy to the human conſtitution to commit all kinds of Sodomies and beſtialities. The intention of Nature, amongſt all the more perfect animals, is to throw the ſemen into the vagina of the female. No animal, when able to get a female, deviates from this univerſal law; and it is the moſt conſummate impudence even to attempt to reaſon men out of it. But Mr. H. ſeems to delight in advancing paradoxes, and in employing his mental as well as generative faculties contrary to the laws of Nature, at leaſt he wiſhes to perſuade us ſo. However, as he is married, and not, as we might expect from the principles laid down above, for the care of his own health, to an ugly beaſt, but to a very fine and amiable woman, this doctrine ſeems to me nothing more or leſs but a new kind of *puff of highly refined quackery*; and as the practice of the Profeſſor in this point agrees ſo little with his theory, we hope, for the happineſs of his venereal patients, the ſame will be the caſe with regard to the manner of treatment of their reſpective complaints.

THE END.